Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Melissa First name Lynn Middle name	First name Middle name
	Bring your picture identification to your meeting with the trustee.	Heiser Last name	Last name
		Suffix (Sr., Jr, II, III)	Suffix (Sr., Jr, II, III)
2.	All other names you have used in the last 8 years	First name	First name
	Include your married or maiden names.	Middle name	Middle name
		Last name	Last name
		First name	First name
		Middle name	Middle name
		Last name	Last name
3.	Only the last 4 digits of your Social Security number or	xxx-xx- <u>4</u> <u>5</u> <u>2</u> <u>3</u>	xxx-xx
	federal Individual Taxpayer Identification number (ITIN)	OR 9xx-xx	OR 9xx-xx

Debtor 1 Melissa Lynn Heiser Case number (if known) _ First Name Middle Name Last Name **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): 4. Any business names and Employer Identification ✓ I have not used any business names or EINs. ☐ I have not used any business names or EINs. Numbers (EIN) you have used in the last 8 years Business name Business name Include trade names and doing business as names Business name Business name EIN EIN EIN If Debtor 2 lives at a different address: Where you live 2400 W 9th St Number Street Number Street Odessa, TX 79763-3765 City State ZIP Code City ZIP Code State **Ector** County County If your mailing address is different from the one above, fill If Debtor 2's mailing address is different from the one it in here. Note that the court will send any notices to you at above, fill it in here. Note that the court will send any notices this mailing address. to you at this mailing address. Number Street Number Street Po Box 1526 P.O. Box P.O. Box Odessa, TX 79760-1526 State ZIP Code City ZIP Code State

Why you are choosing this district to file for bankruptcy Check one:

Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

	ave another reason. Explain. ee 28 U.S.C. § 1408)
,	5 ,
_	

Check one:

Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

have another reason. Explain. See 28 U.S.C. § 1408)

Debt	tor 1 Melissa	Lynn	Heiser		Casan	umber (if known)
	First Name	Middle N	Name Last Nam	ne	Od3C II	uniber (ii known)
Par	t 2: Tell the Court About Yo	our Bank	cruptcy Case			
7.	The chapter of the Bankruptcy Code you are choosing to file under	(Form B		on of each, see <i>Notice Req</i> o of page 1 and check the a		342(b) for Individuals Filing for Bankruptcy
8.	How you will pay the fee	aboordd a pri	out how you may pay. Typica er. If your attorney is submare-printed address. eed to pay the fee in insta- cur Filing Fee in Installment quest that my fee be wain is not required to, waive you t applies to your family size	cally, if you are paying the fer nitting your payment on your allments. If you choose this its (Official Form 103A). ved (You may request this your fee, and may do so only e and you are unable to pay	e yourself, you may p r behalf, your attorney option, sign and atta option only if you are y if your income is les y the fee in installmen	office in your local court for more details ay with cash, cashier's check, or money may pay with a credit card or check with the Application for Individuals to Pay filing for Chapter 7. By law, a judge may, s than 150% of the official poverty line ts). If you choose this option, you must fill 03B) and file it with your petition.
9.	Have you filed for bankruptcy within the last 8 years?	☑ No. ☐ Yes.	District	Wh	MM / DD / YYYY enMM / DD / YYYY	Case number Case number Case number
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	∑ No. □Yes.	Debtor District Debtor District	When When	MM / DD / YYYY	Relationship to you

11. Do you rent your residence?

☐ Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it as part

 ${\bf \ \ \, \ \, }$ Yes. Has your landlord obtained an eviction judgment against you?

☐ No. Go to line 12.

No. Go to line 12.

of this bankruptcy petition.

	First Name	Mid	dle Nai	ne Last Name					
Par	t 3: Report About Any Busin	esse	es Yo	u Own as a Sole Pr	oprietor				
	Annual and annual and an affirm	4	No. G	o to Part 4.					
12.	Are you a sole proprietor of any full- or part-time business?		Yes. N	lame and location of busi	ness				
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any					
	If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.		Numb	er Street				_	
			City			State	ZIP Code	_	
			Chec	k the appropriate box to c	lescribe your	business:			
			П	lealth Care Business (as	defined in 11	U.S.C. § 101(27A))			
			☐ s	ingle Asset Real Estate (as defined in	11 U.S.C. § 101(51B)))		
			_	tockbroker (as defined in					
			_	commodity Broker (as defi	ned in 11 U.S	S.C. § 101(6))			
			□ N	lone of the above					
	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business debtor</i> ? For a definition of <i>small business debtor</i> , see 11 U.S.C. § 101(51D).	dea ope 11 U	dlines. rations J.S.C. No. No.	If you indicate that you ar , cash-flow statement, an § 1116(1)(B). I am not filing under Chap Bankruptcy Code. I am filing under Chap Code.	e a small bus d federal inco hapter 11. oter 11, but I a oter 11 and I a	iness debtor, you mus ome tax return or if any am NOT a small busin am a small business de	ess debtor according to the ebtor according to the definit	lance sheet, statement of exist, follow the procedure in definition in the tion in the Bankruptcy	
		√							
14.	Do you own or have any property that poses or is		No. Yes.	What is the hazard?					
	alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?			If immediate attention is	needed, why	is it needed?			
For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?				Where is the property?	Number	Street			
					City		Ctata	7ID Code	
					City		State	ZIP Code	

Melissa

Lynn

Heiser

Melissa Heiser Lynn

First Name Middle Name Last Name Case number (if known).

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

✓ I received a briefing from an approved credit counseling agency within the 180 before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me incapable

of realizing or making rational decisions about finances.

☐ Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the

internet, even after I reasonably tried to do so

Active duty. I am currently on active military duty in

a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

■ I received a briefing from an approved credit counseling agency within the 180 before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

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I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational

decisions about finances. ☐ Disability. My physical disability causes me to

be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 Melissa		Lynn Heiser			Ca:	Case number (if known)		
	First Name	Middle Name	Last Name					
Part 6: Ansv	wer These Question	ns for Reporti	ng Purposes					
16. What kind	d of debts do you				debts? Consumer debts are define family, or household purpose."	ed in 11 U.S.C. § 101(8) as "incurred by		
nave:		☐ No.	Go to line 16b.					
		☑ Yes.	Go to line 17.					
		-			lebts? Business debts are debts the operation of the business or investigation.	nat you incurred to obtain money for a stment.		
		No. Go to line 16c.						
		☐ Yes.	Go to line 17.					
		16c. State the type of debts you owe that are not consumer debts or business debts.						
17. Are you fi	ling under Chapter 7?	☐ No. I ar	n not filing under Cha	pter 7.	Go to line 18.			
exempt pr and admir are paid th available	estimate that after any coperty is excluded instrative expenses that funds will be for distribution to discreditors?	exp	Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? No Yes					
		1 -49	50-99		1,000-5,000	25,001-50,000 50,000-100,000		
	y creditors do you hat you owe?	100-199	200-999		10,001-25,000	☐ More than 100,000		
		\$0-\$50,0	00		\$1,000,001-\$10 million	\$500,000,001-\$1 billion		
	h do you estimate	\$50,001-	\$100,000		\$10,000,001-\$50 million	\$1,000,000,001-\$10 billion		
your asse	ts to be worth?	\$100,001	-\$500,000		\$50,000,001-\$100 million	310,000,000,001-\$50 billion		
		\$500,001	-\$1 million		\$100,000,001-\$500 million	☐ More than \$50 billion		
		\$0-\$50,0	00		\$1,000,001-\$10 million	\$500,000,001-\$1 billion		
	h do you estimate	\$50,001-	\$100,000		\$10,000,001-\$50 million	\$1,000,000,001-\$10 billion		
your liabii	ır liabilities to be?	\$100,001	-\$500,000		\$50,000,001-\$100 million	\$10,000,000,001-\$50 billion		
		\$500,001	-\$1 million		\$100,000,001-\$500 million	☐ More than \$50 billion		
Part 7: Sign	Below							
For you	l have ex	kamined this petit	ion, and I declare und	er pen	alty of perjury that the information	provided is true and correct.		

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.



/s/ Melissa Lynn Heiser

Melissa Lynn Heiser, Debtor 1

Executed on 03/26/2019

MM/ DD/ YYYY

Debtor 1	Melissa	Lynn	Heiser	Case number (if known)
	First Name	Middle Name	Last Name	
For your att	torney, if you are	I, the attorney fo	r the debtor(s) named in this pet	ition, declare that I have informed the debtor(s) about eligibility to proceed

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this name

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Victor L. Hunt	Date 03/26/2019
Victor L. Hunt, Attorney	MM / DD / YYYY
Victor L. Hunt	
Printed name	
Legal Aid of NorthWest Texas	
Firm name	
1515 Main St.	
Number Street	
Dallas	TX 75201
City	State ZIP Code
Contact phone (214) 243-2231	Email address huntv@lanwt.org
10289700	TX
Bar number	State

Fill in this information	to identify your case a			
Debtor 1	Melissa	Lynn	Heiser	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankru	uptcy Court for the:		Western District of Texas	
Case number				Check if this i amended filin

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

 Part 1: Describe Each Residence, Building 1. Do you own or have any legal or equitable interes ✓ No. Go to Part 2. ☐ Yes. Where is the property? 	et in any residence, building, land, or similar property		
Street address, if available, or other description	What is the property? Check all that apply. ☐ Single-family home ☐ Duplex or multi-unit building	Do not deduct secured claims or exemptions. Put amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property	
	☐ Condominium or cooperative☐ Manufactured or mobile home☐ Land	Current value of the entire property?	Current value of the portion you own?
City State ZIP Code	☐ Investment property☐ Timeshare☐ Other	Describe the nature of your ownership interes as fee simple, tenancy by the entireties, or a life estate), if known.	
County	Who has an interest in the property? Check one. Debtor 1 only		
	☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another	Check if this is comm (see instructions)	unity property
Add the dollar value of the portion you own for all you have attached for Part 1. Write that number here	· · · · · · · · · · · · · · · · · · ·	r pages →	\$0.00

Debte	or 1	Melissa	Lynn	Heiser	Case number (if known)	
		First Name	Middle Name	Last Name	,	
D - **	D	antha a Marina Malai				
Par	t 2: Desc	cribe Your Vehi	icies			
				n any vehicles, whether they are registered or n also report it on Schedule G: Executory Contracts		
3. C	Cars, vans,	trucks, tractors, s	port utility vehicles, i	notorcycles		
	No No					
ţ	Yes					
3	3.1 Make:			Who has an interest in the property? Check one	e. Do not deduct secured cla	ims or exemptions. Put the
	Model:		Entourage	☑ Debtor 1 only ☐ Debtor 2 only	amount of any secured class Creditors Who Have Class	
	Year:		2008	Debtor 1 and Debtor 2 only	Current value of the	Current value of the
	Approxi	mate mileage:	100,000	At least one of the debtors and another	entire property? \$6,340.00	portion you own? \$6,340.00
	Other in	formation:		Check if this is community property (see instructions)		
		with USAutoMax O NDMC2330860472		instructions)		
	you have a	ttached for Part 2.		Il of your entries from Part 2, including any entre		\$6,340.00
				any of the following items?		Current value of the portion you own?
						Do not deduct secured claims or exemptions.
6. F	lousehold	goods and furnis	shings			
	•	Major appliances,	furniture, linens, chin	a, kitchenware		
[☑ No ☑ Yes. Des	scribe	Coffee Table, End Tal	oles, Dinner Table, Dining Chairs, Microwave, Bo	ooks, and Misc. Furnishings.	\$350.00
7. E	Electronics	L				
	Examples:			ereo, and digital equipment; computers, printers, s , cameras, media players, games	scanners; music collections;	
[No No	г		msung S9), and Computer		\$800.00
8. C	Collectibles					
		Antiques and figur		s, or other artwork; books, pictures, or other art ob	ojects;	
	√ No		sedali card collection	s; other collections, memorabilia, collectibles		l
Ţ	Tyes. Des	scribe				

Deb	tor 1	Melissa	Lynn	Heiser	Case number (if known)	
		First Name	Middle Name	Last Name		
9.		for sports and h				
	Examples:			oby equipment; bicycles, pool t	ables, golf clubs, skis; canoes and kayaks;	
	,	carpentry tools; r	musical instruments			
	✓ No					
	Yes. De	scribe				
10.	Firearms					
10.		Diotolo riflos ok	notauna ammunitian and re	plated aguipment		
	Examples:	Pisiois, filles, si	notguns, ammunition, and re	eiated equipment		
	✓ No					
	☐ Yes. D	escribe				
11.	Clothes					
	Examples:	Everyday clothe	es, furs, leather coats, design	ner wear, shoes, accessories		
		, aa, oone	,,			
	☐ No ☐ Yes. D	escribe	Clothes			\$360.00
	Yes. D	escribe				+3.00
12.	Jewelry					
	Examples:	Everyday jewelr	y, costume jewelry, engagen	nent rings, wedding rings, heir	rloom jewelry, watches, gems, gold, silver	
	√ No					
		escribe				
40						
13.	Non-farm					
	Examples:	Dogs, cats, bird	ds, horses			
	No No		Two Dogs: nonbreeding			
	Yes. D	escribe	Two Bogo. Horibrooding			unknown
14	Any other	nersonal and ho	usehold items you did not :	already list, including any he	alth aids you did not list	
. 4.	_	personal and not	accided norms you did not	and any non, mondaing any no	and you did not not	
	✓ No	_				
	☐ Yes. Delivery ☐ Delivery ☐ Yes. Delivery ☐ Yes	escribe				
15	Add the de	ollar value of all o	of your entries from Part 3	including any entries for pag	ies you have attached	
10.				pag		\$1,510.00
		and manne				
Par	t 4: Desc	cribe Your Fin	ancial Assets			
_		de anno anno d	a amiltable betom 11	of the fellowing		tualisa - 6 th
Do	you own or	nave any legal o	r equitable interest in any o	or the following?		t value of the you own?
						deduct secured
						r exemptions.
16.	Cash					
	Examples:	Money you have	e in your wallet, in your home	e, in a safe deposit box, and on	hand when you file your petition	
	, □ No			•		
	Yes					\$40.00

		First Name	Middle Name	Last Name		
17.	Deposits of	f money				
	Examples:			certificates of deposit; shares in credit s with the same institution, list each.	unions, brokerage houses, and othe	r
	☐ No					
	✓ Yes					
			Institution name:			
			institution name.			
17.1.	. Checking a	ccount:	Community Nation Bank		\$11.09	
17.2.	. Checking a	ccount:				
17.3.	. Savings acc	count:	My Community FCU		\$225.49	
17.4.	. Savings acc	count:				
17.5	. Certificates	of deposit:			_	
17.6	Other finance	cial account:				
17.7	Other finance	cial account:				
17.8	. Other financ	cial account:				
17.9	. Other financ	cial account:				
18.	Ronde mu	tual funde or nuk	olicly traded stocks			
10.			-	e firms, money market accounts		
	✓ No	20114 141140, 11110	ourrous accounts may brokenag	oo,o.,ao. accaseao		
	Yes					
19.			nd interests in incorporated	and unincorporated businesses, inclu	uding an interest in	
		rtnership, and jo		•	Ū	
	√ No					
	Yes. Giv					
		tion about				
200			h an da an d adh an na madiabla			
20.				and non-negotiable instruments necks, promissory notes, and money ord	tors	
	-			someone by signing or delivering them		
	√ No					
	Yes. Giv					
		tion about				
21			unte			
21.		or pension acco), thrift savings accounts, or other pensi	ion or profit-sharing plans	
	✓ No		, r. toogri, +o r(it), +00(b)	,, outrings accounts, or other perior	5. prom onaming plants	
		t each account				
	separate					

Melissa

Lynn

Heiser

	First Name	Middle Name	Last Name			
22	Security deposite and prenaymen	ato.				
22.	Security deposits and prepaymer		vou may continue con ico c	r uso from a company		
	Your share of all unused deposits you Examples: Agreements with landlo		•		mpanies, or	
	others ☑ No □ Yes					
23.	Annuities (A contract for a periodic	payment of money to	o you, either for life or for a	number of years)		
	☑ No ☐ Yes					
24.	Interests in an education IRA, in 26 U.S.C. §§ 530(b)(1), 529A(b), a	_	lified ABLE program, or ι	nder a qualified state tuitior	n program.	
	☑ No ☐ Yes					
Instit	ution name and description. Separa	tely file the records of	any interests. 11 U.S.C. §	521(c):		
25.	Trusts, equitable or future interesbenefit	sts in property (othe	r than anything listed in li	ne 1), and rights or powers e	exercisable for your	
	✓ No ☐ Yes. Give specific					
	information about them					
26.	Patents, copyrights, trademarks, Examples: Internet domain name		ther intellectual property s from royalties and licensi	og agroomente		
	✓ No	es, websites, proceed	s nom royanies and neerisi	ig agreements		
	Yes. Give specific information about them					
27.	Licenses, franchises, and other g	ueneral intangibles				
~ 1.	Examples: Building permits, excl	usive licenses, coop	erative association holding	s, liquor licenses,		
	professional licenses ✓ No					
	Yes. Give specific information about them					
Mone	ey or property owed to you?					Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you					
	√ No	_			_	
	Yes. Give specific information				Federal:	
	them, including whether y already filed the returns a				State:	
	tax years				Local:	
]	
29.	Family support					
	Examples: Past due or lump sum	alimony, spousal sup	port, child support, mainter	ance, divorce settlement, prop	perty settlement	
	,	, i		. 71 -1	<u> </u>	

Melissa

Lynn

Heiser

	First Name Middle N	vame Last Name		
	No Yes. Give specific information	Back Child Support	Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$7,049.84
30.	Other amounts someone owes you Examples: Unpaid wages, disability insuran Security benefits; unpaid loans you ✓ No ✓ Yes. Give specific information		ay, vacation pay, workers' compensation, Social	
31.	Interests in insurance policies Examples: Health, disability, or life insurance ✓ No ☐ Yes. Name the insurance company of each policy and list its value	e; health savings account (HSA); cred Company name:	it, homeowner's, or renter's insurance Beneficiary:	Surrender or refund value:
32.	Any interest in property that is due you from If you are the beneficiary of a living trust, experience because someone has died. ✓ No ☐ Yes. Give specific information		y, or are currently entitled to receive property	
33.	Claims against third parties, whether or not Examples: Accidents, employment disputes ✓ No ☐ Yes. Describe each claim		lemand for payment	
34.	Other contingent and unliquidated claims to set off claims No Yes. Describe each claim	of every nature, including countercl	aims of the debtor and rights	
35.	Any financial assets you did not already list No Yes. Give specific information			
36.	Add the dollar value of all of your entries from Part 4. Write that number here			\$7,326.42

Melissa

Lynn

Heiser

	First Name	Middle Name	Last Name		
Par	5: Describe Any Busi	ness-Related Property	/ You Own or Ha	ve an Interest In. List any real estate in P	art 1.
37.	Do you own or have any leg	pal or equitable interest in an	ny business-related p	property?	
	No. Go to Part 6.				
	Yes. Go to line 38.				
					Current value of the portion you own? Do not deduct secured claims or exemptions.
38.	Accounts receivable or com	missions you already earne	d		
	✓ No ☐ Yes. Describe]
	Tes. Describe				
39.	Office equipment, furnishin	ngs, and supplies			
	Examples: Business-related	d computers, software, mode	ms, printers, copiers,	fax machines, rugs, telephones, desks, chairs, electron	ic devices
	✓ No ☐ Yes. Describe]
	res. Describe				
40.	Machinery, fixtures, equipm	ent, supplies you use in bus	siness, and tools of	your trade	
	✓ No]
	Yes. Describe				
41.	Inventory				
	√ No [7
	Yes. Describe				
40					
42.	Interests in partnerships or	r joint ventures			
	✓ No ☐ Yes. Describe				
43.	Customer lists, mailing lists	s, or other compilations			
	✓ No ☐ Yes. Do your lists include	la narsanally identifiable inf	formation (as defined	in 11 I I S C & 101//11 \)?	
	✓ No	le personally identifiable inf	offiation (as defined	#11 0.3.C. § 101(41A)):	7
	Yes. Describe.				
44.	Any business-related prope	rty you did not already list			
	☑ No	.,,,,			
	☐ Yes. Give specific				
4-	information				
45.				for pages you have attached→	\$0.00
Par	6: Describe Any Farm	n- and Commercial Fish	ing-Related Prop	erty You Own or Have an Interest In.	
		interest in farmland, list it in			

Melissa

Lynn

Heiser

	First Name Middle Name Last Name	
46.	Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? ✓ No. Go to Part 7. ☐ Yes. Go to line 47.	
		Current value of the portion you own? Do not deduct secured claims or exemptions.
47.	Farm animals Examples: Livestock, poultry, farm-raised fish Vo Yes	
48.	Crops—either growing or harvested ✓ No ☐ Yes. Give specific information	
49.	Farm and fishing equipment, implements, machinery, fixtures, and tools of trade ✓ No ☐ Yes	
50.	Farm and fishing supplies, chemicals, and feed ✓ No ☐ Yes	
51.	Any farm- and commercial fishing-related property you did not already list No Yes. Give specific information	
	Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here	\$0.00
Par	t 7: Describe All Property You Own or Have an Interest in That You Did Not List Above	
53.	Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No Yes. Give specific information	
54.	Add the dollar value of all of your entries from Part 7. Write that number here→	\$0.00
Par	t 8: List the Totals of Each Part of this Form	

Melissa

Lynn

Heiser

Debtor 1 Melissa Lynn Heiser Case number (if known) _ First Name Middle Name Last Name Part 1: Total real estate, line 2..... \$0.00 Part 2: Total vehicles, line 5 \$6,340.00 56. 57. Part 3: Total personal and household items, line 15 \$1,510.00 58. Part 4: Total financial assets, line 36 \$7,326.42 Part 5: Total business-related property, line 45 \$0.00 59. Part 6: Total farm- and fishing-related property, line 52 \$0.00 61. Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61..... \$15,176.42 Copy personal property total -> \$15,176.42 62. \$15,176.42 Total of all property on Schedule A/B. Add line 55 + line 62.....

Fill in this information	to identify your case:				l	
Debtor 1	Melissa	Lynn	Heiser			
	First Name	Middle Name	Last Name	_		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankr	uptcy Court for the:		Western District of	f Texas		
Case number (if known)						Check if this is an amended filing
Official Form	106C				-	
Schedule (C: The Pro	nerty Yo	ou Claim a	as Exempt		04/16
exemptions—such as	s those for health aid f 100% of fair market your exemption woul	s, rights to receiv value under a lav d be limited to the	ve certain benefits, a w that limits the exen e applicable statutor	and tax-exempt retirem nption to a particular d	ent funds-may be	icable statutory limit. Some unlimited in dollar amount. However, if yo walue of the property is determined to
Which set of ex	emptions are you cla	niming? Check one	e only, even if your sp	oouse is filing with you.		
1	ning state and federal r					
✓ You are clair	ning federal exemptior	ns. 11 U.S.C. § 522	2(b)(2)			
2. For any propert	y you list on <i>Schedul</i>	e A/B that you cla	nim as exempt, fill in	the information below.		
Brief description of Schedule A/B that lis	the property and line sts this property		rent value of the tion you own	Amount of the exemp	ption you claim	Specific laws that allow exemption
		•	by the value from nedule A/B	Check only one box fo	or each exemption.	
Brief description:				≤ \$3.77	75.00	11 U.S.C. § 522(d)(2)
2008 Hyundai Entour VIN: KNDMC2330860 Odessa	age 47208 Lease with USA	utoMax	\$6,340.00	100% of fair mark	et value, up to	
Line from Schedule A/B:	3.1			☑ \$2,56	65.00	11 U.S.C. § 522(d)(5)
COLICUATO AVD.	J. 1					

Brief description:

Line from Schedule A/B:

Coffee Table, End Tables, Dinner Table, Dining

6

Chairs, Microwave, Books, and Misc. Furnishings.

\$350.00

☐ 100% of fair market value, up to any applicable statutory limit

☐ 100% of fair market value, up to

any applicable statutory limit

\$350.00

11 U.S.C. § 522(d)(3)

Debtor 1		Melissa	Lynn	Heiser	Case number (if known)							
		First Name	Middle Name	Last Name								
Par	art 2: Additional Page											
3.	3. Are you claiming a homestead exemption of more than \$160,375?											
	(Subject to adj ✓ No	iustment on 4/01/19 a	nd every 3 years after th	at for cases filed on or after the date of adjustment.)								
	Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?											
	□ No											
	Yes											

 Melissa
 Lynn
 Heiser
 Case number (if known)

 First Name
 Middle Name
 Last Name

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption.	
Brief description:	# 200.00	\$600.00	11 U.S.C. § 522(d)(3)
TV, Smart Phone (Samsung S9), and Computer Line from Schedule A/B: 7_	\$800.00	100% of fair market value, up to any applicable statutory limit	
		₫ \$200.00	11 U.S.C. § 522(d)(5)
		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		√ \$360.00	11 U.S.C. § 522(d)(3)
Clothes	\$360.00	100% of fair market value, up to	11 0.3.0. § 322(0)(3)
Line from Schedule A/B: 11_		any applicable statutory limit	
Brief description:			
Two Dogs: nonbreeding	unknown		
Line from Schedule A/B: 13_			
Brief description: Cash	\$40.00	4 \$40.00	11 U.S.C. § 522(d)(5)
Line from Schedule A/B: 16		100% of fair market value, up to any applicable statutory limit	
Brief description:		√ 1 \$11.09	44 11 0 0 6 500(-1)/5)
Community Nation Bank	\$11.09	\$11.09 100% of fair market value, up to	11 U.S.C. § 522(d)(5)
Checking account		any applicable statutory limit	
Line from Schedule A/B: 17			
Brief description:		√ \$225.49	44 11 0 0 0 500(1)/5)
My Community FCU	\$225.49	\$225.49 100% of fair market value, up to	11 U.S.C. § 522(d)(5)
Savings account Line from Schedule A/B: 17		any applicable statutory limit	
Brief description:			44.11.0.0.0.500()/(42)(7)
Back Child Support	\$7,049.84	\$7,049.84	11 U.S.C. § 522(d)(10)(D)
Support		100% of fair market value, up to any applicable statutory limit	
Line from Schedule A/B: 29			

Fill in this information	to identify your case:						
Debtor 1	Melissa	Lynn	Heiser				
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse, if filing)	First Name	Middle Name	Last Name	<u>.</u>			
United States Bankr	uptcy Court for the:		Western District of Tex	as			
Case number (if known)						Check if to amended	
Official Forn	n 106D				l		
<u>Schedule</u>	<u>D: Credito</u>	<u>rs Who H</u>	ave Claims	Secured	l by Prope	erty	12/15
known). I. Do any creditors ha No. Check this b	ove claims secured by box and submit this formation below.	your property?	es, and attach it to this	·	, , , ,	s, write your name a	ind case number (if
2. List all secured	claims. If a creditor has	s more than one sec	cured claim, list the credi	tor separately for	Column A	Column B	Column C
each claim. If mo		as a particular claim	, list the other creditors i	, ,	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion
2.1		Describe the	ne property that secure	s the claim:			
Creditor's Name							
Number St	treet	As of the da	ate you file, the claim is: (Check all that apply			
City	State ZIP C	— DConting	•	э. ю. сан дах арру.			
City	State ZIP C debt? Check one.	Jode Unliquid					
Debtor 1 only		Dispute					
Debtor 2 only	,		ien. Check all that apply.				
Debtor 1 and	Debtor 2 only	☐An agre	ement you made (such a	as mortgage or			
At least one o	f the debtors and anoth	ner secured	I car loan)	-			
Chack if this	claim relates to a	□ Statutor	y lien (such as tax lien, r	mechanic's lien)			

 \square Judgment lien from a lawsuit

Add the dollar value of your entries in Column A on this page. Write that number here:

Other (including a right to offset)

Last 4 digits of account number ___ __ __

community debt

Date debt was incurred

\$0.00

Debtor 1	Melissa First Name	Lynn Middle Name	Heiser Last Name		Case numb	er (if known)	
Part 1:	Additional Page After listing any entri 2.3, followed by 2.4, a		e, number them beg	inning with	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.2 Creditor	s Name	Describ	e the property that secure	es the claim:			
Debi	Street State ZIP wes the debt? Check one. for 1 only for 2 only for 1 and Debtor 2 only fast one of the debtors and and ck if this claim relates to a munity debt	Code Code Continuity C	uidated	/. as mortgage or			
Date de	bt was incurred	Othe	r (including a right to offse	et)			

Last 4 digits of account number ___ __ __ __

Add the dollar value of your entries in Column A on this page. Write that number here:

If this is the last page of your form, add the dollar value totals from all pages. Write that number

\$0.00

\$0.00

Fill in this information to	identify your case:					
Debtor 1	Melissa	Lynn	Heiser			
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankrup	otcy Court for the:		Western District of Texas			
Case number (if known)					☐ Check if amende	this is an d filing
Official Form	106E/F			-		
Schedule E	:/F: Credit	ors Who	Have Unsecured CI	aims		12/15
	to this page. On the f Your PRIORITY have priority unsecu	top of any addition		•		
identify what type of possible, list the cla Part 1. If more that	of claim it is. If a claim aims in alphabetical on one creditor holds	n has both priority an order according to the a particular claim, li	s more than one priority unsecured claim, lis nd nonpriority amounts, list that claim here ar he creditor's name. If you have more than tw ist the other creditors in Part 3. ons for this form in the instruction booklet.)	nd show both priority an	d nonpriority amou	nts. As much as
	,,		, and the second	Total clain		Nonpriority amount
Priority Creditor's	Name		Last 4 digits of account number When was the debt incurred?			
Number S	treet		As of the date you file, the claim is: Che apply. Contingent	ck all that		
City	State	ZIP Code	☐ Unliquidated☐ Disputed			
Debtor 1 on Debtor 2 on	,	3 .	Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you own	e the		

government

Other. Specify

Claims for death or person injury while you were intoxicated

Debtor 2 only
Debtor 1 and Debtor 2 only

Is the claim subject to offset?

☐ No☐ Yes

At least one of the debtors and another

Check if this claim is for a community debt

Debtor 1	Melissa	Lynn	Heiser	Case number (if known)

First Name Middle Name Last Name

David On Link All as Venus NONED CONTY II	d Olehen	
Part 2: List All of Your NONPRIORITY Unsecured	d Claims	
3. Do any creditors have nonpriority unsecured claims agai	inst you?	
No. You have nothing to report in this part. Submit this for	orm to the court with your other schedules.	
☑ Yes.		
unsecured claim, list the creditor separately for each claim.	abetical order of the creditor who holds each claim. If a creditor has more that For each claim listed, identify what type of claim it is. Do not list claims already itors in Part 3. If you have more than three nonpriority unsecured claims fill out	included in Part 1. If more
		Total claim
<u> </u>		\$10,165.00
Avant, Inc. Nonpriority Creditor's Name	Last 4 digits of account number 4618	Ψ10,103.00
' '	When was the debt incurred? 2016	
222 N La Salle St Ste 1700 Number Street	As of the date you file, the claim is: Check all that apply.	
Chicago, IL 60601-1101	Contingent	
City State ZIP Code	Unliquidated	
Who incurred the debt? Check one.	☐ Disputed	
✓ Debtor 1 only	Type of NONPRIORITY unsecured claim:	
Debtor 2 only	Student loans	
Debtor 1 and Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other	
Check if this claim is for a community debt	similar debts	
Is the claim subject to offset?	☑ Other. Specify Installment Account	
☑ No	installment Account	
☐ Yes		
Capital One Bank	Last 4 digits of account number 8382	\$4,170.00
Nonpriority Creditor's Name	When was the debt incurred? 2014	
10700 Capitol One Way	As of the date you file, the claim is: Check all that apply.	
Number Street	☐ Contingent	
Glen Allen, VA 23060-9243 City State ZIP Code	──── ☑ Unliquidated	
Who incurred the debt? Check one.	☐ Disputed	
Debtor 1 only	Type of NONPRIORITY unsecured claim:	
Debtor 2 only	Student loans	
Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or	
At least one of the debtors and another	divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other	
☐ Check if this claim is for a community debt	similar debts	
Is the claim subject to offset?	✓ Other. Specify	
☑ No	Credit Card	
☐ Yes		
4.3 Citicards Cbna	Last 4 digits of account number ious	\$6,998.00
Nonpriority Creditor's Name	When was the debt incurred? 2015	
Citicorp Credit Svc/Centralized Bankruptcy	As of the date you file, the claim is: Check all that apply.	
PO Box 790040	Contingent	
Number Street	✓ Unliquidated	
Saint Louis, MO 63179	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
☑ Debtor 1 only	lue Obligations arising out of a separation agreement or	
☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only	divorce that you did not report as priority claims	
At least one of the debtors and another	 Debts to pension or profit-sharing plans, and other similar debts 	
Check if this claim is for a community debt	other. Specify	
_	Credit Card	
Is the claim subject to offset? ☑ No		

☐ Yes

 Melissa
 Lynn
 Heiser
 Case number (if known)

 First Name
 Middle Name
 Last Name

Afte	r listing any entries on this page, number them beginning with	4.5, followed by 4.6, and so forth.	Total claim
4.4	Comenity Bank	Last 4 digits of account number ious	\$3,299.00
	Nonpriority Creditor's Name	When was the debt incurred? 2016	
	PO Box 182789	As of the date you file, the claim is: Check all that apply.	
	Number Street	☐ Contingent	
	Columbus, OH 43218-2789 City State ZIP Code	Unliquidated Unliquidated	
	•	☐ Disputed	
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
	Debtor 1 only	Student loans	
	Debtor 2 only		
	Debtor 1 and Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other	
	☐ Check if this claim is for a community debt	similar debts	
	Is the claim subject to offset? ✓ No		
	☐ Yes		
4.5	Comenity Bank / Lane Bryant	Last 4 digits of account number 2955	\$1,625.00
	Nonpriority Creditor's Name	When was the debt incurred? 2015	
	Po Box 659728	- As of the date you file, the claim is: Check all that apply.	
	Number Street	☐ Contingent	
	San Antonio, TX 78265-9728 City State ZIP Code	- ☑ Unliquidated	
	•	☐ Disputed	
	Who incurred the debt? Check one.		
	Debtor 1 only	Type of NONPRIORITY unsecured claim: Student loans	
	Debtor 2 only		
	Debtor 1 and Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other	
	☐ Check if this claim is for a community debt	similar debts	
	Is the claim subject to offset?	✓ Other. Specify	
	☑ No	Credit Card	
	Yes		
4.6	Comenity Bank/ Bryln Hme	Last 4 digits of account number 0886	\$1,086.00
	Nonpriority Creditor's Name	When was the debt incurred? 2014	
	Po Box 182789		
	Number Street	As of the date you file, the claim is: Check all that apply. Contingent	
	Columbus, OH 43218-2789	. ~	
	City State ZIP Code	Unliquidated	
	Who incurred the debt? Check one.	☐ Disputed	
	☑ Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	☐ Student loans	
	☐ Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or	
	☐ At least one of the debtors and another	divorce that you did not report as priority claims	
	☐ Check if this claim is for a community debt	 Debts to pension or profit-sharing plans, and other similar debts 	
	Is the claim subject to offset?	☑ Other. Specify	
	☑ No	Credit Card	
	☐ Yes		
	- 100		

 Melissa
 Lynn
 Heiser
 Case number (if known)

 First Name
 Middle Name
 Last Name

Comenity Bank/ HSN	Last 4 digits of account number 8765	\$1,78
Nonpriority Creditor's Name	When was the debt incurred? 2013	
Po Box 182120		
Number Street	As of the date you file, the claim is: Check all that apply.	
Columbus, OH 43218-2120	Contingent	
City State ZIP Code	Unliquidated	
Who incurred the debt? Check one.	☐ Disputed	
Debtor 1 only	Type of NONPRIORITY unsecured claim:	
Debtor 2 only	☐ Student loans	
☐ Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or	
At least one of the debtors and another	divorce that you did not report as priority claims Dehts to pension or profit-sharing plans, and other	
☐ Check if this claim is for a community debt	similar debts	
s the claim subject to offset?	Other. Specify	
☑ No	Credit Card	
Yes		
Comenity Bank/Ashstwrt	Last 4 digits of account number 0654	\$38
Nonpriority Creditor's Name	When was the debt incurred? 2016	
Po Box 182789 Number Street	As of the date you file, the claim is: Check all that apply.	
Columbus, OH 43218-2789	☐ Contingent	
City State ZIP Code	── ☑ Unliquidated	
Who incurred the debt? Check one.	☐ Disputed	
✓ Debtor 1 only	Type of NONPRIORITY unsecured claim:	
Debtor 2 only	Student loans	
Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or	
☐ At least one of the debtors and another	divorce that you did not report as priority claims	
☐ Check if this claim is for a community debt	 Debts to pension or profit-sharing plans, and other similar debts 	
·	Similar debts ☑ Other. Specify	
s the claim subject to offset? ☑ No	— Опет. эреспу	
_		
Yes		\$1,20
Comenity Bank/Roamans Ionpriority Creditor's Name	Last 4 digits of account number 0556	<u> </u>
Attn: Bankruptcy	When was the debt incurred? 2014	
PO Box 182125	As of the date you file, the claim is: Check all that apply.	
lumber Street	Contingent	
Columbus, OH 43218	☑ Unliquidated	
City State ZIP Code	☐ Disputed	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
✓ Debtor 1 only	☐ Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or	
Debtor 1 and Debtor 2 only	divorce that you did not report as priority claims	
☐ At least one of the debtors and another	 Debts to pension or profit-sharing plans, and other similar debts 	
☐ Check if this claim is for a community debt	☑ Other. Specify	
s the claim subject to offset?	Credit Card	
s are stand subject to offset:		
☑ No		

 Melissa
 Lynn
 Heiser
 Case number (if known)

 First Name
 Middle Name
 Last Name

After	listing any entries on this page, number them beginning wi	ith 4.5, followed by 4.6, and so forth.	Total claim
4.10	Comenity Bank/Torrid	Last 4 digits of account number 2557	\$346.00
	Nonpriority Creditor's Name	When was the debt incurred? 2015	
	Po Box 182789	As of the date you file, the claim is: Check all that apply.	
	Number Street	☐ Contingent	
	Columbus, OH 43218-2789 City State ZIP Code	✓ Unliquidated	
	Who incurred the debt? Check one.	☐ Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	_	☐ Student loans	
	Debtor 2 only	Obligations arising out of a separation agreement or	
	Debtor 1 and Debtor 2 only	divorce that you did not report as priority claims	
	☐ At least one of the debtors and another☐ Check if this claim is for a community debt	 Debts to pension or profit-sharing plans, and other similar debts 	
	Is the claim subject to offset? ✓ No	☑ Other. Specify Credit Card	
	☐ Yes		
4.11			\$1,059.00
4.11	Conn Credit Company Nonpriority Creditor's Name	Last 4 digits of account number 5304	
	Po Box 2358	When was the debt incurred? 2015	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	Beaumont, TX 77704-2358	Contingent	
	City State ZIP Code	── ✓ Unliquidated	
	Who incurred the debt? Check one.	☐ Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	☐ Debtor 2 only	☐ Student loans	
	Debtor 1 and Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	☐ At least one of the debtors and another☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset? ☑ No	Other. Specify Rent to Own Contract	
	Yes		
4.12	Discover Card	Last 4 digits of account number 1832	\$4,165.00
	Nonpriority Creditor's Name	When was the debt incurred? 2016	
	PO Box 15316 Number Street	As of the date you file, the claim is: Check all that apply.	
	Wilmington, DE 19850	☐ Contingent	
	City State ZIP Code	☑ Unliquidated	
	Who incurred the debt? Check one.	☐ Disputed	
	☑ Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	☐ Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or	
	At least one of the debtors and another	divorce that you did not report as priority claims	
	☐ Check if this claim is for a community debt	 Debts to pension or profit-sharing plans, and other similar debts 	
	Is the claim subject to offset?	✓ Other. Specify	
	☑ No	Credit Card	
	☐ Yes		

Melissa	Lynn	Heiser	Case number (if known)
First Name	Middle Name	Last Name	,

After listing any entries on this page, number them beginning	with 4.5, followed by 4.6, and so forth.	Total claim
Equifax Nonpriority Creditor's Name PO Box 740241 Number Street Atlanta, GA 30374-0241 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Notice Only	unknown
☐ Yes Experian Nonpriority Creditor's Name 701 Experian Pkwy Number Street Allen, TX 75013-3713 City State ZIP Code Who incurred the debt? Check one. ☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ☑ No ☐ Yes	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Notice Only	unknown

 Melissa
 Lynn
 Heiser
 Case number (if known)

 First Name
 Middle Name
 Last Name

After listing any entries on this page, number them beginning	with 4.5, followed by 4.6, and so forth.	Total claim
A.15 LVNV Funding LLC Partial Account Nonpriority Creditor's Name PO Box 1269 Number Street Greenville, SC 29602 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Last 4 digits of account number 4618 When was the debt incurred? 2017 As of the date you file, the claim is: Check all that apply. □ Contingent ☑ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Collection Account	\$11,352.00
Remarks: Collection for Webbank 4.16 Members Financial FCU Nonpriority Creditor's Name 3100 Sunburst Dr Number Street Midland, TX 79707-5216 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Last 4 digits of account number 0200 When was the debt incurred? 2017 As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Auto Loan	<u>\$47.00</u>

 Melissa
 Lynn
 Heiser
 Case number (if known)

 First Name
 Middle Name
 Last Name

Midland Funding	Last 4 digits of account number 7746	\$1,785.0
Nonpriority Creditor's Name	When was the debt incurred? 2017	
2365 Northside Dr Ste 300 Number Street	As of the date you file, the claim is: Check all that apply.	
San Diego, CA 92108	☐ Contingent	
City State ZIP Code	☑ Unliquidated	
Who incurred the debt? Check one.	☐ Disputed	
☑ Debtor 1 only	Type of NONPRIORITY unsecured claim:	
Debtor 2 only	☐ Student loans	
Debtor 1 and Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
At least one of the debtors and anotherCheck if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	☑ Other. Specify	
☑ No	Collection Account	
☐ Yes		
Plaza Services, Llc	Last 4 digits of account number 5980	\$369.0
Nonpriority Creditor's Name	When was the debt incurred? 2018	
110 Hammond Dr Ste 110	As of the date you file, the claim is: Check all that apply.	
Number Street	☐ Contingent	
Atlanta, GA 30328 City State ZIP Code	☑ Unliquidated	
Who incurred the debt? Check one.	☐ Disputed	
Debtor 1 only	Type of NONPRIORITY unsecured claim:	
Debtor 2 only	☐ Student loans	
Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
At least one of the debtors and anotherCheck if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	☑ Other. Specify	

 Melissa
 Lynn
 Heiser
 Case number (if known)

 First Name
 Middle Name
 Last Name

Portfolio Recovery	Last 4 digits of account number ious	\$5,606.4
Nonpriority Creditor's Name	When was the debt incurred? 2014	
PO Box 41067		
Number Street	As of the date you file, the claim is: Check all that apply.	
Norfolk, VA 23541	Contingent ✓ Unliquidated	
City State ZIP Code	•	
Who incurred the debt? Check one.	☐ Disputed	
Debtor 1 only	Type of NONPRIORITY unsecured claim:	
Debtor 2 only	Student loans	
☐ Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or	
At least one of the debtors and another	divorce that you did not report as priority claims	
☐ Check if this claim is for a community debt	 Debts to pension or profit-sharing plans, and other similar debts 	
Is the claim subject to offset?	☑ Other. Specify	
☑ No	Collection Accounts	
☐ Yes		
Remarks: Collection for Synchrony Bank/Walmart Lawsuit A-18-09-1255-CV Ector County DC		
Remarks: Collection for Synchrony Bank/Walmart Lawsuit A-18-09-1255-CV Ector County DC	Last 4 digits of account number 4121	\$1,456.
Remarks: Collection for Synchrony Bank/Walmart Lawsuit	Last 4 digits of account number 4121 When was the debt incurred? 2013	\$1,456.
Remarks: Collection for Synchrony Bank/Walmart Lawsuit A-18-09-1255-CV Ector County DC Seventh Avenue Nonpriority Creditor's Name 1112 Seventh Ave	When was the debt incurred? 2013	\$1,456.
Remarks: Collection for Synchrony Bank/Walmart Lawsuit A-18-09-1255-CV Ector County DC Seventh Avenue Nonpriority Creditor's Name 1112 Seventh Ave Number Street	When was the debt incurred? 2013 As of the date you file, the claim is: Check all that apply.	\$1,456.
Remarks: Collection for Synchrony Bank/Walmart Lawsuit A-18-09-1255-CV Ector County DC Seventh Avenue Nonpriority Creditor's Name 1112 Seventh Ave Number Street Monroe, WI 53566-1364	When was the debt incurred? 2013 As of the date you file, the claim is: Check all that apply. Contingent	\$1,456.
Remarks: Collection for Synchrony Bank/Walmart Lawsuit A-18-09-1255-CV Ector County DC Seventh Avenue Nonpriority Creditor's Name 1112 Seventh Ave Number Street Monroe, WI 53566-1364 City State ZIP Code	When was the debt incurred? 2013 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	\$1,456 .
Remarks: Collection for Synchrony Bank/Walmart Lawsuit A-18-09-1255-CV Ector County DC Seventh Avenue Nonpriority Creditor's Name 1112 Seventh Ave Number Street Monroe, WI 53566-1364 City State ZIP Code Who incurred the debt? Check one.	When was the debt incurred? 2013 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed	\$1,456.
Remarks: Collection for Synchrony Bank/Walmart Lawsuit A-18-09-1255-CV Ector County DC Seventh Avenue Nonpriority Creditor's Name 1112 Seventh Ave Number Street Monroe, WI 53566-1364 City State ZIP Code	When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim:	<u></u> \$1,456.
Remarks: Collection for Synchrony Bank/Walmart Lawsuit A-18-09-1255-CV Ector County DC Seventh Avenue Nonpriority Creditor's Name 1112 Seventh Ave Number Street Monroe, WI 53566-1364 City State ZIP Code Who incurred the debt? Check one.	When was the debt incurred? 2013 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans	\$1,456.
Remarks: Collection for Synchrony Bank/Walmart Lawsuit A-18-09-1255-CV Ector County DC Seventh Avenue Nonpriority Creditor's Name 1112 Seventh Ave Number Street Monroe, WI 53566-1364 City State ZIP Code Who incurred the debt? Check one.	When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or	\$1,456.
Remarks: Collection for Synchrony Bank/Walmart Lawsuit A-18-09-1255-CV Ector County DC Seventh Avenue Nonpriority Creditor's Name 1112 Seventh Ave Number Street Monroe, WI 53566-1364 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only	When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims	\$1,456.
Remarks: Collection for Synchrony Bank/Walmart Lawsuit A-18-09-1255-CV Ector County DC Seventh Avenue Nonpriority Creditor's Name 1112 Seventh Ave Number Street Monroe, WI 53566-1364 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or	<u></u> \$1,456.
Remarks: Collection for Synchrony Bank/Walmart Lawsuit A-18-09-1255-CV Ector County DC Seventh Avenue Nonpriority Creditor's Name 1112 Seventh Ave Number Street Monroe, WI 53566-1364 City State ZIP Code Who incurred the debt? Check one. 1 Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt	When was the debt incurred? 2013 As of the date you file, the claim is: Check all that apply. ☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	\$1,456.i
Remarks: Collection for Synchrony Bank/Walmart Lawsuit A-18-09-1255-CV Ector County DC Seventh Avenue Nonpriority Creditor's Name 1112 Seventh Ave Number Street Monroe, WI 53566-1364 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another	When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	\$1,456.

 Melissa
 Lynn
 Heiser
 Case number (if known)

 First Name
 Middle Name
 Last Name

After listing any entries on this page, number them beginning	with 4.5, followed by 4.6, and so forth.	Total claim
Syncb/Amazon	Last 4 digits of account number 7677	\$1,381.00
Nonpriority Creditor's Name	When was the debt incurred? 2015	
Po Box 965036	As of the date you file, the claim is: Check all that apply.	
Number Street	☐ Contingent	
Orlando, FL 32896-5036 City State ZIP Code	—— ☑ Unliquidated	
· · ·	☐ Disputed	
Who incurred the debt? Check one.		
Debtor 1 only	Type of NONPRIORITY unsecured claim: Student loans	
☐ Debtor 2 only		
Debtor 1 and Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
 At least one of the debtors and another Check if this claim is for a community debt 	☐ Debts to pension or profit-sharing plans, and other	
·	similar debts	
Is the claim subject to offset? ☑ No	Other. Specify Credit Card	
☐ Yes		
2 SYNCB/Car Care Disc Tire	Last 4 digits of account number 2266	\$1,784.00
Nonpriority Creditor's Name	When was the debt incurred? 2014	
Po Box 965001	As of the date you file, the claim is: Check all that apply.	
Number Street	Contingent	
Orlando, FL 32896-5001 City State ZIP Code	— ☑ Unliquidated	
,	☐ Disputed	
Who incurred the debt? Check one.	·	
☑ Debtor 1 only	Type of NONPRIORITY unsecured claim:	
Debtor 2 only	Student loans	
Debtor 1 and Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other	
☐ Check if this claim is for a community debt	similar debts	
Is the claim subject to offset?	Other. Specify	
☑ No	Credit Card	
Yes		
3 SYNCB/Conns	Last 4 digits of account number 3553	\$1,887.00
Nonpriority Creditor's Name	When was the debt incurred? 2015	
Po Box 965036	As of the date you file, the claim is: Check all that apply.	
Number Street	Contingent	
Orlando, FL 32896-5036 City State ZIP Code	Unliquidated	
•	☐ Disputed	
Who incurred the debt? Check one.	·	
☑ Debtor 1 only	Type of NONPRIORITY unsecured claim:	
☐ Debtor 2 only	 Student loans Obligations arising out of a separation agreement or 	
Debtor 1 and Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other	
☐ Check if this claim is for a community debt	similar debts	
Is the claim subject to offset?	☑ Other. Specify	
☑ No	Credit Card	
☐ Yes		

 Melissa
 Lynn
 Heiser
 Case number (if known)

 First Name
 Middle Name
 Last Name

.24 SYNCB/OVC	Last 4 digits of account number 3482	<u>\$555.0</u>
Nonpriority Creditor's Name	When was the debt incurred? 2014	
Po Box 965005	As of the date you file, the claim is: Check all that apply.	
Number Street	Contingent	
Orlando, FL 32896-5005	✓ Conlingent ✓ Unliquidated	
City State ZIP Code		
Who incurred the debt? Check one.	☐ Disputed	
Debtor 1 only	Type of NONPRIORITY unsecured claim:	
☐ Debtor 2 only		
Debtor 1 and Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other	
Check if this claim is for a community debt	similar debts	
Is the claim subject to offset?	✓ Other. Specify	
☑ No	Credit Card	
☐ Yes		
25 SYNCB/Walmart	Last 4 digits of account number cts.	\$3,369.0
Nonpriority Creditor's Name	When was the debt incurred? 2014	
Po Box 965024	As of the date you file, the claim is: Check all that apply.	
Number Street	☐ Contingent	
Orlando, FL 32896-5024 City State ZIP Code	Unliquidated	
,	☐ Disputed	
Who incurred the debt? Check one. ✓ Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or	
Debtor 1 and Debtor 2 only	divorce that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other	
☐ Check if this claim is for a community debt	similar debts	
Is the claim subject to offset?	☑ Other. Specify	
☑ No	Credit Cards	
☐ Yes		

 Melissa
 Lynn
 Heiser
 Case number (if known)

 First Name
 Middle Name
 Last Name

After listing any entries on this page, number them beginn	ning with 4.5, followed by 4.6, and so forth.	Total claim
4.26 Toyota Motor credit Corp Nonpriority Creditor's Name Po Box 9786 Number Street Cedar Rapids, IA 52409 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Remarks: Vehicle was surrendered	Last 4 digits of account number 0416 When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Auto Loan	\$12,000.00
4.27 Transunion Nonpriority Creditor's Name PO Box 1000 Number Street Chester, PA 19022 City State ZIP Code Who incurred the debt? Check one. 1 Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Notice Only	unknown

 Melissa
 Lynn
 Heiser
 Case number (if known)

 First Name
 Middle Name
 Last Name

Verizon Wireless	Last 4 digits of account number 9830	\$513.0
Nonpriority Creditor's Name	When was the debt incurred? 2015	
PO Box 650051		
Number Street	 As of the date you file, the claim is: Check all that apply. Contingent 	
Dallas, TX 75265-0051	— ☑ Contingent ☑ Unliquidated	
City State ZIP Code		
Who incurred the debt? Check one.	☐ Disputed	
☑ Debtor 1 only	Type of NONPRIORITY unsecured claim:	
☐ Debtor 2 only	☐ Student loans	
☐ Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or	
At least one of the debtors and another	divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other	
☐ Check if this claim is for a community debt	 Debts to pension or profit-sharing plans, and other similar debts 	
Is the claim subject to offset?	✓ Other. Specify	
☑ No	Phone Contract	
☐ Yes		
Webbank/Fingerhut	Last 4 digits of account number 2887	\$3,430.0
Nonpriority Creditor's Name	When was the debt incurred? 2013	
6250 Ridgewood Rd	As of the date you file, the claim is: Check all that apply.	
Number Street	Contingent	
Saint Cloud, MN 56303-0820 City State ZIP Code	— ☑ Unliquidated	
5 = 5	Disputed	
Who incurred the debt? Check one.		
☑ Debtor 1 only	Type of NONPRIORITY unsecured claim:	
Debtor 2 only	☐ Student loans	
☐ Debtor 1 and Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other	
Check if this claim is for a community debt	similar debts	
Is the claim subject to offset?	☑ Other. Specify	
☑ No	Revolving Account	
☐ Yes		
Wells Fargo Card Services	Lost 4 digits of account number	\$296.0
Nonpriority Creditor's Name	Last 4 digits of account number When was the debt incurred? 2013	
Po Box 14517	As of the date you file, the claim is: Check all that apply.	
Number Street		
Des Moines, IA 50306-3517 City State ZIP Code	☐ Contingent	
,	✓ Unliquidated	
Who incurred the debt? Check one.	☐ Disputed	
☑ Debtor 1 only	Type of NONPRIORITY unsecured claim:	
☐ Debtor 2 only	☐ Student loans	
Debtor 1 and Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
At least one of the debtors and another		
Check if this claim is for a community debt	 Debts to pension or profit-sharing plans, and other similar debts 	
Is the claim subject to offset?	✓ Other. Specify	
Is the claim subject to offset? ☑ No	Other. Specify Credit Card	

 Melissa
 Lynn
 Heiser
 Case number (if known)

 First Name
 Middle Name
 Last Name

After listing any entries on this page, number them beginning w	vith 4.5, followed by 4.6, and so forth.	Total claim
World Finance Co. Nonpriority Creditor's Name P.O. Box 6429 Number Street Greensboro, SC 29696 City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? ✓ No Yes	Last 4 digits of account number 0531 When was the debt incurred? 2016 As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Loan	\$1,332.00

Melissa	Lynn	Heiser	Case number (if known)
First Name	Middle Name	Last Name	,

Part 3: List Others to Be Notified About a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional person to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.			
Toyota Motor Credit Corporation	On which entry in Part 1 or Part 2 did you list the original creditor?		
Name 5005 N River Blvd Ne	Line 4.26 of (Check one): Part 1: Creditors with Priority Unsecured Claims		
Number Street	Part 2: Creditors with Nonpriority Unsecured Claims		
Cedar Rapids, IA 52411-6634	· ·		
City State ZIP Cod	Last 4 digits of account number		
Capital One	On which entry in Part 1 or Part 2 did you list the original creditor?		
Name	Line 4.2 of (Check one): Part 1: Creditors with Priority Unsecured Claims		
Attn: General Correspondence/Bankruptcy	Part 2: Creditors with Nonpriority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims		
PO Box 30285	Part 2: Creditors with Nonpriority Unsecured Claims —		
Number Street	Last 4 digits of account number		
Salt Lake City, UT 84130-0287 City State ZIP Cod	_		
Oily State ZIF Cou	5 		
Capital One	On which entry in Part 1 or Part 2 did you list the original creditor?		
Name Po Box 85015	Line 4.2 of (Check one): Part 1: Creditors with Priority Unsecured Claims		
Number Street	Part 2: Creditors with Nonpriority Unsecured Claims		
Richmond, VA 23285-5015	- Fart 2. Ordanors with Horiphority Oribodated Ordanis		
City State ZIP Cod	e Last 4 digits of account number		
Citicards CBNA	On which entry in Part 1 or Part 2 did you list the original creditor?		
Name			
PO Box 6497	Line 4.3 of (Check one): Part 1: Creditors with Priority Unsecured Claims		
Po Box 6241	Part 2: Creditors with Nonpriority Unsecured Claims		
Number Street	Last 4 digits of account number		
Sioux Falls, SD 57117-6241	_		
City State ZIP Cod	e e e e e e e e e e e e e e e e e e e		
Midland Funding	On which entry in Part 1 or Part 2 did you list the original creditor?		
Name	Line 4.3 of (Check one): Part 1: Creditors with Priority Unsecured Claims		
2365 Northside Dr Ste 300 Number Street	Part 2: Creditors with Nonpriority Unsecured Claims		
San Diego, CA 92108	Part 2: Creditors with Nonpriority Unsecured Claims		
City State ZIP Cod	e Last 4 digits of account number		
Citibank NA	On which entry in Part 1 or Part 2 did you list the original creditor?		
Name			
701 East 60th St. North	Line 4.3 of (Check one): Part 1: Creditors with Priority Unsecured Claims		
Number Street	Part 2: Creditors with Nonpriority Unsecured Claims		
Sioux Falls, SD 57104 City State ZIP Cod	e Last 4 digits of account number		
City State ZIP Cod	East 4 digits of account number		
Citicards CBNA	On which entry in Part 1 or Part 2 did you list the original creditor?		
Name	Line 4.3 of (Check one): Part 1: Creditors with Priority Unsecured Claims		
PO Box 6497	Part 1: Creditors with Priority Unsecured Claims Part 1: Creditors with Nonpriority Unsecured Claims		
Po Box 6241	Part 2: Creditors with Nonpriority Unsecured Claims		
Number Street	Last 4 digits of account number		
Sioux Falls, SD 57117-6241 City State ZIP Cod	_		
City State ZIP Cod	♥		

 Melissa
 Lynn
 Heiser
 Case number (if known)

 First Name
 Middle Name
 Last Name

Part 3: List Others to Be Notified About a Debt That You Already Listed Additional Page

Midland Credit Management			On which entry in Part 1 or Part 2 did you list the original creditor?
Name			Line 4.4 of (Check one): Part 1: Creditors with Priority Unsecured Claims
2635 Northside Dr. Suite 300 Number Street			Part 2: Creditors with Nonpriority Unsecured Claims
San Diego, CA 92108			Part 2: Creditors with Nonphority Unsecured Claims
City	State	ZIP Code	Last 4 digits of account number
Comonity Pank/Lana Pryant			On which entry in Part 1 or Part 2 did you list the original creditor?
Comenity Bank/ Lane Bryant Name			On which entry in Part 1 or Part 2 did you list the original creditor?
Po Box 182789			Line 4.5 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims
Columbus, OH 43218-2789			<u> </u>
City	State	ZIP Code	Last 4 digits of account number
Comenity Bank/ Roamans			On which entry in Part 1 or Part 2 did you list the original creditor?
Name		_	Live A0 of (Observery) D Book A One filters with Direct to Live count of Obine
Po Box 182789			Line 4.9 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims
Columbus, OH 43218-2789	<u> </u>	710.0	Leat A divite of account number
City	State	ZIP Code	Last 4 digits of account number
Seventh Ave.			On which entry in Part 1 or Part 2 did you list the original creditor?
Name 1515 21st St			Line 4.20 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			✓ Part 2: Creditors with Nonpriority Unsecured Claims
Monroe, WI 53566			Part 2. Creditors with Nonphority Onsecured Claims
City	State	ZIP Code	Last 4 digits of account number
Rausch Sturm Israel, etc.			On which entry in Part 1 or Part 2 did you list the original creditor?
Name			
15660 North Dallas Pkwy. Suite 3	350		Line 4.19 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims
Dallas, TX 75248			
City	State	ZIP Code	Last 4 digits of account number
Synchrony Bank/Walmart			On which entry in Part 1 or Part 2 did you list the original creditor?
Name			Line 4.19 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Attn: Bankruptcy			
PO Box 956060			Part 2: Creditors with Nonpriority Unsecured Claims
Number Street			Last 4 digits of account number
Orlando, FL 32896-5060			Last 4 digits of account number
City	State	ZIP Code	
SYNCHRONY BANK			On which entry in Part 1 or Part 2 did you list the original creditor?
Name			Line 4.19 of (<i>Check one</i>): Part 1: Creditors with Priority Unsecured Claims
ATTN: BANKRUPTCY DEPT			
PO BOX 965060			Part 2: Creditors with Nonpriority Unsecured Claims
Number Street			Last 4 digits of account number
ORLANDO, FL 32896-5060			Last 7 digits of account number
City	State	ZIP Code	

 Melissa
 Lynn
 Heiser
 Case number (if known)

 First Name
 Middle Name
 Last Name

Part 3: List Others to Be Notified About a Debt That You Already Listed Additional Page

Portfolio Recovery Associates, LLC			On which entry in Part 1 or Part 2 did you list the original creditor?		
Name 120 Corporate Blvd # 100			Line 4.19 of (Check one): Part 1: Creditors with Priority Unsecured Claims		
Number Street			✓ Part 2: Creditors with Nonpriority Unsecured Claims		
Norfolk, VA 23502-4952			Tart 2. Ordators with Northholity of booking ordating		
City	State	ZIP Code	Last 4 digits of account number		
SYNCB/Amazon			On which entry in Part 1 or Part 2 did you list the original creditor?		
Name Po Box 965015			Line 4.21 of (Check one): Part 1: Creditors with Priority Unsecured Claims		
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims		
Orlando, FL 32896-5015			,		
City	State	ZIP Code	Last 4 digits of account number		
SYNCB/Car Care Disc Tire			On which entry in Part 1 or Part 2 did you list the original creditor?		
Name			Line 4.22 of (<i>Check one</i>): Part 1: Creditors with Priority Unsecured Claims		
Po Box 965068 Number Street			Part 2: Creditors with Nonpriority Unsecured Claims		
Orlando, FL 32896-5068			Part 2. Creditors with Noripholity offsecured Claims		
City	State	ZIP Code	Last 4 digits of account number		
SYNCB/QVC			On which entry in Part 1 or Part 2 did you list the original creditor?		
Name					
Po Box 965036			Line 4.24 of (Check one): Part 1: Creditors with Priority Unsecured Claims		
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims		
Orlando, FL 32896-5036	<u> </u>		Land Address of account country		
City	State	ZIP Code	Last 4 digits of account number		
Rausch Sturm Israel, etc.		_	On which entry in Part 1 or Part 2 did you list the original creditor?		
15660 North Dallas Pkwy. Suite	350		Line 4.25 of (Check one): Part 1: Creditors with Priority Unsecured Claims		
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims		
Dallas, TX 75248			Tart 2. Greations with Horiphority of booking ordinary		
City	State	ZIP Code	Last 4 digits of account number		
Conns Credit Corporation			On which entry in Part 1 or Part 2 did you list the original creditor?		
Name			Line 4.11 of (<i>Check one</i>): Part 1: Creditors with Priority Unsecured Claims		
3295 College St					
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims		
Beaumont, TX 77701-4611	State	ZIP Code	Last 4 digits of account number		
City	State	ZIP Code	Last 4 digits of account number		
Members Financial FCU Name			On which entry in Part 1 or Part 2 did you list the original creditor?		
Po Box 9609			Line 4.16 of (Check one): Part 1: Creditors with Priority Unsecured Claims		
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims		
Midland, TX 79708-9609			= 1 a.t. 1. 5. sakoro marrioripriority oriocoursa oldinio		
City	State	ZIP Code	Last 4 digits of account number		

 Melissa
 Lynn
 Heiser
 Case number (if known)

 First Name
 Middle Name
 Last Name

Part 3: List Others to Be Notified About a Debt That You Already Listed Additional Page

World Finance			On which entry in Part 1 or Part 2 did you list the original creditor?		
Name			Line 4.31 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims		
108 Frederick Street					
Number Street					
Greenville, SC 29607					
City	State	ZIP Code	Last 4 digits of account number		
WebBank			On which entry in Part 1 or Part 2 did you list the original creditor?		
Name 215 S State St Ste 800			Line 4.15 of (<i>Check one</i>): Part 1: Creditors with Priority Unsecured Claims		
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims		
Salt Lake City, UT 84111			T art 2. Creditors with Northholity offsecured Claims		
City	State	ZIP Code	Last 4 digits of account number		
Scott and Associates			On which entry in Part 1 or Part 2 did you list the original creditor?		
Name					
Po Box 115220			Line 4.15 of (Check one): Part 1: Creditors with Priority Unsecured Claims		
Number Street			✓ Part 2: Creditors with Nonpriority Unsecured Claims		
Carrollton, TX 75011-5220					
City	State	ZIP Code	Last 4 digits of account number		
SYNCHRONY BANK			On which entry in Part 1 or Part 2 did you list the original creditor?		
Name			Line A47 of (Oheadanna) D. Bort A. Oraditara with Britain Llandon and Oheira		
ATTN: BANKRUPTCY DEPT			Line 4.17 of (Check one): Part 1: Creditors with Priority Unsecured Claims		
PO BOX 965060			Part 2: Creditors with Nonpriority Unsecured Claims		
Number Street					
ORLANDO, FL 32896-5060			Last 4 digits of account number		
City	State	ZIP Code			

Part 4:

 Melissa
 Lynn
 Heiser
 Case number (if known)

 First Name
 Middle Name
 Last Name

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

			Total claim
Total claims	6a. Domestic support obligations	6a.	\$0.00
from Part 1	6b. Taxes and certain other debts you owe the government	6b.	\$0.00
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. +	\$0.00
	6e. Total. Add lines 6a through 6d.	6e.	\$0.00
			Total claim
Total claims			
from Part 2	6f. Student loans	6f.	\$0.00
Irom Part 2	6f. Student loans 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6f. 6g.	\$0.00 \$0.00
Irom Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as		<u> </u>
Irom Part 2	 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and 	6g.	\$0.00

Fill in this information	to identify your case:			
Debtor 1	Melissa	Lynn	Heiser	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankru	uptcy Court for the:		Western District of Texas	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or compa	any with whom you hav	ve the contract or lease	State what the contract or lease is for
2.1	Sprint			Phone Lease Contract to be ASSUMED
	Name			
	PO Box 4191			
	Number Stre	eet		
	Carol Stream, IL	60197		
	City	State	ZIP Code	
2.2	USAutomax			Auto Lease Contract to be ASSUMED
	Name			CONTRACTOR DO FROSTINED
	1024 N County I	Rd W		
	Number Stre			
	Odessa, TX 797	763-3436		
	City	State	ZIP Code	
2.3				
	Name			
	Number Stre	eet		
	City	State	ZIP Code	
2.4				
	Name			
	Number Stre	eet		
	City	State	ZIP Code	
2.5				
	Name			
	Number Stre	eet		
	City	State	ZIP Code	

Fill in this information	to identify your case	e:					
Debtor 1	Melissa	Lynn	Heiser				
	First Name	Middle Name	Last Name	_			
Debtor 2							
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States Bankr	uptcy Court for the:		Western District of Texas	<u> </u>			
Case number						Check if this is an	
(if known)						amended filing	
Official Forn Schedule		odebtors					12/15
both are equally resp	onsible for supplyi	ng correct information	n. If more space is neede	complete and accurate as posed, copy the Additional Page, fil rite your name and case number	I it out, and num	ber the entries in the bo	
1. Do you have any	codebtors? (If you	are filing a joint case,	do not list either spouse a	s a codebtor.)			
✓No							
Yes							
	•	• •	operty state or territory? ington, and Wisconsin.)	(Community property states and	<i>territories</i> include	e Arizona, California, Idal	ho,
No. Go to line	3						

Yes. In which community state or territory did you live? ______. Fill in the name and current address of that person.

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Schedule D, line _____

Schedule E/F, line _______

Schedule G, line _____

☑Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

State

State

ZIP Code

ZIP Code

Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Name

Number

Column 1: Your codebtor

Street

City

3.1

Name

Number

City

Street

Official Form 106H Schedule H: Your Codebtors page 1 of 1

Schedule I: Your Income Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying	he following date: 12/15 g correct
Debtor 2 (Spouse, if filling) First Name Middle Name Last Name United States Bankruptcy Court for the: Western District of Texas Case number (if known) Difficial Form 106I Schedule I: Your Income Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying the supplying	he following date: 12/15 g correct
Case number (if known) Case number (if known) Case as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying the complex of the chapter 13 income as of the chapter 14 income as of the chapter 15 income as of the chapte	he following date: 12/15 g correct
United States Bankruptcy Court for the: Western District of Texas Case number (if known) Western District of Texas An amended filing A supplement showing por chapter 13 income as of the supplement showing por chapter 14 income as of the supplement showing por chapter 14 income as of the supplement showing por chapter 14 income as of the supplement showing por chapter 14 income as of the supplement showing por chapter 14 income as of the supplement showing por chapter 14 income as of the supplement showing por chapter 14 income as of the supplement showing por chapter 14 income as of the supplement showing por chapter 14 income as of the supplement showing por chapter 14 income as of the supplement showing por chapter 14 income as of the supplement showing por chapter 14 income as of the supplement showing por chapter 14 income as of the supplement showing por chapter 14 income as of the supplement showing por chapter 14 income as of the supplement showing	he following date: 12/15 g correct
Case number (if known) A supplement showing porchapter 13 income as of to MM / DD / YYYYY Official Form 106I Schedule I: Your Income Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying	he following date: 12/15 g correct
Case number (if known) Chapter 13 income as of to MM / DD / YYYY Chapter 13 income as of to MM / DD / YYYYY Chapter 14 income as of to MM / DD / YYYYY Chapter 14 income as of to MM / DD / YYYYY Chapter 15 income as of to MM / DD / YYYYY Chapter 15 income as of to MM / DD / YYYYY Chapter 15 income as of to MM / DD / YYYYY Chapter 15 income as of to MM / DD / YYYYY Chapter 15 income as of to MM / DD / YYYYY Chapter 15 income as of to MM / DD / YYYYY Chapter 15 income as of to MM / DD / YYYYY Chapter 15 income as of to MM / DD / YYYYY Chapter 15 income as of to MM / DD / YYYYY Chapter 15 income as of to MM / DD / YYYYY Chapter 15 income as of to MM / DD / YYYYY Chapter 15 income as of to MM / DD / YYYYY Chapter 15 income as of to MM / DD / YYYYY Chapter 15 income as of to MM / DD / YYYYY Chapter 15 income as of to MM / DD / YYYYY	he following date: 12/15 g correct
Official Form 1061 Schedule I: Your Income Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying	g correct
Schedule I: Your Income Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying	g correct
Schedule I: Your Income Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying	g correct
Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying	g correct
pouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the to dditional pages, write your name and case number (if known). Answer every question. Part 1: Describe Employment	p or any
1. Fill in your employment information. Debtor 1 Debtor 2 or non-filing sp	ouse
If you have more than one job, attach a separate page with information about additional Employment status Employment status Employed Not Employed Not Employed Not Employed Not Employed Not Employed Not Employed	
employers. Employer's name	
Include part time, seasonal, or self-employed work.	
Employer's address Occupation may include student or homemaker, if it applies. Number Street Number Street Number Street	
City State Zip Code City State	Zip Code
How long employed there?	
Part 2: Give Details About Monthly Income	
Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spoure separated	se unless you
are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more than one employer, combine the information for all employers for that person on the lines below.	
are separated.	
are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need mo attach a separate sheet to this form. For Debtor 1 For Debtor 2 or	

\$0.00

\$0.00

4. Calculate gross income. Add line 2 + line 3.

 Melissa
 Lynn
 Heiser

 First Name
 Middle Name
 Last Name

Case number (if known)

		For Debtor 1		For Debtor 2 or non-filing spouse	
Copy line 4 here→	4.	\$0.00		\$0.00	
5. List all payroll deductions:					
5a. Tax, Medicare, and Social Security deductions	5a.	\$0.00		\$0.00	
5b. Mandatory contributions for retirement plans	5b.	\$0.00		\$0.00	
5c. Voluntary contributions for retirement plans	5c.	\$0.00		\$0.00	
5d. Required repayments of retirement fund loans	5d.	\$0.00		\$0.00	
5e. Insurance	5e.	\$0.00		\$0.00	
5f. Domestic support obligations	5f.	\$0.00		\$0.00	
5g. Union dues	5g.	\$0.00		\$0.00	
5h. Other deductions. Specify:	5h.	+\$0.00	+	\$0.00	
Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.	\$0.00		\$0.00	
Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$0.00		\$0.00	
List all other income regularly received:		φσσ		Ψ0.00	
8a. Net income from rental property and from operating a business, profession, or farm					
Attach a statement for each property and business showing gross receipts,					
ordinary and necessary business expenses, and the total monthly net income.	8a.	\$1,281.60		\$0.00	
8b. Interest and dividends	8b.	\$0.00		\$0.00	
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive					
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	90	\$804.00		\$0.00	
8d. Unemployment compensation	8c.	\$0.00		\$0.00	
8e. Social Security	8d.	\$0.00		\$0.00	
8f. Other government assistance that you regularly receive	8e.				
Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.					
Specify:	8f.	\$0.00		\$0.00	
8g. Pension or retirement income	8g.	\$0.00		\$0.00	
8h. Other monthly income. Specify:	8h.	+ \$0.00	+	\$0.00	
Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$2,085.60		\$0.00	
. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse	10.	\$2,085.60	+	\$0.00	= \$2
State all other regular contributions to the expenses that you list in Schedule	J.				
Include contributions from an unmarried partner, members of your household, your friends or relatives.	depende	ents, your roommates, ar	nd oth	er	
Do not include any amounts already included in lines 2-10 or amounts that are not a	available	to pay expenses listed i	n <i>Sch</i>	edule J.	
Specify:			_	11. +	
Add the amount in the last column of line 10 to the amount in line 11. The rest amount on the Summary of Your Assets and Liabilities and Certain Statistical Information		•	ne. W	rite that	\$2,
					Combined monthly inc
3. Do you expect an increase or decrease within the year after you file this form?					
✓ No. ☐ Yes. Explain:					

Debtor 1 Melissa Lynn Heiser Case number (if known) _ First Name Middle Name Last Name 8a. Attached Statement **Business Income, Contract Labor for USAutoMax Odessa** FINANCIAL REVIEW OF THE DEBTOR'S BUSINESS (NOTE: ONLY INCLUDE information directly related to the business operation.) PART A - ESTIMATED AVERAGE FUTURE GROSS MONTHLY INCOME: 1 Gross Monthly Income: \$1,281.60 PART B - ESTIMATED AVERAGE FUTURE MONTHLY EXPENSES: Payments to be Made Directly by Debtor to Secured Creditors for Pre-Petition Business TOTAL PAYMENTS TO SECURED CREDITORS \$0.00 Other Expenses TOTAL OTHER EXPENSES \$0.00

4 TOTAL MONTHLY EXPENSES (Add item 2 - 21)

PART C - ESTIMATED AVERAGE NET MONTHLY INCOME:

5 AVERAGE NET MONTHLY INCOME(Subtract item 23 from item 1)

\$0.00

\$1,281.60

Fil	l in this information to	identify your case:					
D	Debtor 1	Melissa	Lynn	Heiser			
		First Name	Middle Name	Last Name		Check if this is:	
D	ebtor 2					☐ An amended filing	
(5	Spouse, if filing)	First Name	Middle Name	Last Name	_	A supplement show	
U	Inited States Bankrupt	cy Court for the:		Western District	of Texas	chapter 13 income	as of the following date:
_	Case number f known)					MM / DD / YYYY	_
	fficial Form		20200				
	chedule J:						12/15
nee Pa	ded, attach another s	sheet to this form. (write your name and case no		prrect information. If more space is ewer every question.
	✓ No. Go to line 2. ☐ Yes. Does Debto ☐ No	or 2 live in a separa		Expenses for Sep	parate Household of Debtor 2.		
2.	Do you have depen	idents?	□No				
	Do not list Debtor 1 a		Yes. Fill out th		Dependent's relationship t Debtor 1 or Debtor 2	o Dependent age	t's Does dependent live with you?
	Do not state the depe	endents' names.	each depende	nt			
					Child	<u>13</u>	—— □No. ☑Yes. □No. □Yes.
							 □No. □Yes.
							No. ☐Yes.
							No. Yes.
3.	Do your expenses in of people other that your dependents?	•	☑ No □Yes				
Pá	art 2: Estimate	Your Ongoing M	lonthly Expens	ses			
							to report expenses as of a date after
the	е рапкгиртсу IS пеd.	ıı ans is a suppiem	ieritai <i>SCNedule J</i> ,	check the box at	the top of the form and fill in	i uie applicable date.	
	clude expenses paid ch assistance and ha						Your expenses
4.	The rental or home ground or lot.	ownership expens	es for your reside	nce. Include first n	nortgage payments and any re	nt for the 4.	\$650.00
	If not included in lin	ne 4:					
	4a. Real estate taxes	3				4a.	\$0.00
	4b. Property, homeo	wner's, or renter's ir	nsurance			4b.	\$0.00
	An I Inma madate con					4c.	\$0.00

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

\$0.00

\$0.00

4d.

MelissaLynnHeiserFirst NameMiddle NameLast Name

Case number (if known)

		Your expenses
5. Additional mortgage payments for your residence, such as home equity loans	5.	
6. Utilities:		
6a. Electricity, heat, natural gas	6a.	\$150.00
6b. Water, sewer, garbage collection	6b.	\$60.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$390.00
6d. Other. Specify:	6d.	\$0.00
7. Food and housekeeping supplies	7.	\$350.00
8. Childcare and children's education costs	8.	\$50.00
9. Clothing, laundry, and dry cleaning	9.	\$50.00
10. Personal care products and services	10.	\$50.00
11. Medical and dental expenses	11.	\$26.00
 Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 	12.	\$100.00
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$0.00
14. Charitable contributions and religious donations	14.	\$0.00
15. Insurance.		
Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a.	\$0.00
15b. Health insurance	15b.	\$1.00
15c. Vehicle insurance	15c.	\$54.00
15d. Other insurance. Specify:	15d.	\$0.00
 Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 	16.	\$0.00
17. Installment or lease payments:		
17a. Car payments for Vehicle 1	17a.	\$150.00
17b. Car payments for Vehicle 2	17b.	
17c. Other. Specify:	17c.	
17d. Other. Specify:	17d.	
 Your payments of alimony, maintenance, and support that you did not report as dedu from your pay on line 5, Schedule I, Your Income (Official Form 106I). 	cted 18.	\$0.00
19. Other payments you make to support others who do not live with you. Specify:	19.	\$0.00
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I	l: Your Income.	
20a. Mortgages on other property	20a.	\$0.00
20b. Real estate taxes	20b.	\$0.00
20c. Property, homeowner's, or renter's insurance	20c.	\$0.00
20d. Maintenance, repair, and upkeep expenses	20d.	\$0.00
20e. Homeowner's association or condominium dues	20e.	\$0.00

Deb	otor 1	Melissa	Lynn	Heiser	Case number (if know	n)
		First Name	Middle Name	Last Name		
21.	Other. Spec	ify:			21. +	\$0.00
22.	Calculate yo	our monthly expens	ses.			
	22a. Add line	es 4 through 21.			22a	\$2,081.00
	22b. Copy lir	ne 22 (monthly expe	enses for Debtor 2), if any,	from Official Form 106J-2	22b	\$0.00
	22c. Add line	22a and 22b. The	result is your monthly exp	enses.	22c	\$2,081.00
23.	Calculate yo	our monthly net inc	come.			
	23a. Copy lir	ne 12 (your combine	ed monthly income) from S	Schedule I.	23a	\$2,085.60
	23b. Copy yo	our monthly expense	es from line 22c above.		23b. _	\$2,081.00
	23c. Subtrac	t your monthly expe	enses from your monthly in	come.		# 4.00
	The re	sult is your <i>monthly</i>	net income.		23c	\$4.60
24.	For example mortgage pa	, do you expect to fi	nish paying for your car lo	es within the year after you file this an within the year or do you expect y modification to the terms of your mo	our	
	mortgage payment to increase or decrease because of a modification to the terms of your modification to the your modification to y					

Fill in this information	to identify your case:			
Debtor 1	Melissa	Lynn	Heiser	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankru	uptcy Court for the:		Western District of Texas	
Case number				
(if known)				

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

and check the box at the top of this page.	
Part 1: Summarize Your Assets	
	Your assets Value of what you own
1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00 \$15,176.42 \$15,176.42
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
 Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 	\$0.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$83,444.43
Your total liabilities	\$83,444.43
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$2,085.60
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$2,081.00

Debtor 1 Melissa Heiser Case number (if known) _ Lynn First Name Middle Name Last Name Answer These Questions for Administrative and Statistical Records 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. **√**1 Yes 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income. Copy your total current monthly income from Official \$1,397.40 Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. 9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: Total claim From Part 4 on Schedule E/F, copy the following: 9a. Domestic support obligations (Copy line 6a.) \$0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$0.00 9d. Student loans. (Copy line 6f.)

9e. Obligations arising out of a separation agreement or divorce that you did not report as priority

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

claims. (Copy line 6g.)

9g. Total. Add lines 9a through 9f.

\$0.00

\$0.00

\$0.00

Fill in this information	to identify your case:			
Debtor 1	Melissa	Lynn	Heiser	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankru	uptcy Court for the:		Western District of Texas	
Case number (if known)				
(ii kiiowii)				

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
id you pay or agree to pay someone who is NOT an att	corney to help you fill out bankruptcy forms?
Í No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
nder penalty of perjury, I declare that I have read the su	ummary and schedules filed with this declaraion and that they are true and correct.
X /s/ Malissa I ynn Haiser	
/s/ Melissa Lynn Heiser Melissa Lynn Heiser, Debtor 1	- X
•	

Fill in this information	to identify your case:			
Debtor 1	Melissa	Lynn	Heiser	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankru	uptcy Court for the:		Western District of Texas	
Case number (if known)				

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Vhat is your curren Married					
Not married					
	ars, have you lived anywhere o	other than where you live n	ow?		
☐ No					
Yes. List all of the Debtor 1:	places you lived in the last 3 ye	Dates Debtor 1 lived there	Debtor 2:		Dates Debtor 2 lived there
			Same as Debtor 1		Same as Debtor 1
129 W 57th St B		From _2015	_		From
lumber Street		To <u>2017</u>	Number Street		То
Odessa, TX 79764-3	3606	_			_
ity	State ZIP Code		City	State ZIP Code	_
			Same as Debtor 1		Same as Debtor 1
		From			_ From
umber Street		To	Number Street		To
ity	State ZIP Code	_	City	State ZIP Code	_

Debtor 1	Melissa	Lynn	Heiser		Case number (if kno	own)
	First Name	Middle Name	Last Name			
						nity property states and territories
_	ona, California, Idaho, Lo	uisiana, Nevad	da, New Mexico, Puerto R	Rico, Texas, Washington, and N	Wisconsin.)	
√ No						
☐ Yes. M	Make sure you fill out Sche	edule H: Your	Codebtors (Official Form	106H).		
Dort 2: E	unlain the Courses	of Vous Inc.	200			
Part 2: Ex	xplain the Sources	or your inco	ome			
4. Did you h	nave any income from en	nplovment or	from operating a busine	ess during this year or the tw	o previous calendar vears	?
Fill in the tot	al amount of income you	received from	all jobs and all businesse	es, including part-time activities		•
_	ng a joint case and you na	ive income tha	at you receive together, list	t it only once under Debtor 1.		
☐ No						
✓ Yes. F	fill in the details.					
		D	ebtor 1		Debtor 2	
		S	ources of income	Gross Income	Sources of income	Gross Income
		С	heck all that apply.	(before deductions and	Check all that apply.	(before deductions and
				exclusions)		exclusions)
			Wages, commissions,		☐ Wages, commissions,	
From Jan	nuary 1 of current year ur filed for bankruptcy:	ntil the	bonuses, tips		bonuses, tips	
date you	med for bankruptcy.	\checkmark	Operating a business	\$3,278.80	Operating a business	
			•			
	alendar year:	$\mathbf{\Delta}$	Wages, commissions, bonuses, tips	\$31,361.00	☐ Wages, commissions, bonuses, tips	
(January 1	1 to December 31, <u>2018</u> YY	<u></u>	Operating a business	\$2,114.00	Operating a business	
			Toporaumy a baomioso	ψ2,114.00	_ operating a sacinoco	
For the ca	alendar year before that:	\checkmark	Wages, commissions,		☐ Wages, commissions,	
	1 to December 31, <u>2017</u>)	bonuses, tips	\$32,314.00	bonuses, tips	
	YY	YY 🗹	Operating a business	\$110.00	Operating a business	
5 Did you r	eceive any other income	during this w	oar or the two provious o	ralandar voare?		
Include inco	me regardless of whether	that income is	taxable. Examples of oth	er income are alimony; child s		mployment, and other public benefit
	pensions; rental income; in that you received togethe			lawsuits; royalties; and gamble	ling and lottery winnings. If y	ou are filing a joint case and you
	s that you received togeth	or, not it or ny or	noc under Debter 1.			
U No						
Yes. F	Fill in the details.					
		D	ebtor 1		Debtor 2	
		S	ources of income	Gross income from each	Sources of income	Gross Income from each
		D	escribe below.	source	Describe below.	source
				(before deductions and exclusions)		(before deductions and exclusions)
						3.0.00.0.10)
	nuary 1 of current year u		C and Addtional	\$883.00		
date you	filed for bankruptcy:	_	hild Tax Credit	\$2,412.00		
		<u>Cl</u>	hild Support			

			Lynn	Heiser		Case number (if	
	First I	Name	Middle Na	ame Last Name			
For last o	calendar ye	ar.		IRA Distribution	\$1,988.00		
		nber 31, <u>2018</u>	١)	Child Support	\$9,648.00	-	
oarraary	T to Becom		YYY	отпа саррот	Ψ0,0-10.00		_
For the c	calendar ye	ear before tha	t:	IRA withdrawal	\$8,153.00		
January	1 to Decen	nber 31, <u>2017</u> Y	<u>'</u> '	Child Support	\$9,648.00		
rt 3: L	ist Certa.	ain Paymer	าts You M	ade Before You Filed	d for Bankruptcy		
Are eithe	er Debtor 1	s or Debtor 2	's debts prin	narily consumer debts?			
□No.	Neither [Debtor 1 nor I	Debtor 2 has	s primarily consumer del	ots. Consumer debts are define	ed in 11 U.S.C. § 101(8) as	"incurred by an
	individua	I primarily for a	a personal, fa	amily, or household purpos	se."	- ,,	
	_	•	ore you filed	for bankruptcy, did you pay	any creditor a total of \$6,425*	or more?	
	☐No. G	o to line 7.					
	☐ Yes.	List below ea	ach creditor to		\$6,425* or more in one or mor		
	— 165.	creditor. Do		payments for domestic sup for this bankruptcy case.	pport obligations, such as child	support and allmony. Also	, do not moidde
	_	creditor. Do payments to	an attorney f	for this bankruptcy case.	oport obligations, such as child t for cases filed on or after the		, do not molado
	_	creditor. Do payments to	an attorney f	for this bankruptcy case.			, do not moude
√ 1Yes.	* Subject	creditor. Do payments to to adjustment	o an attorney for on 4/01/19 a	for this bankruptcy case. and every 3 years after that primarily consumer del	t for cases filed on or after the	date of adjustment.	, do not modec
√ 1Yes.	* Subject Debtor 1 During th	creditor. Do payments to to adjustment or Debtor 2 of e 90 days before	o an attorney for on 4/01/19 a	for this bankruptcy case. and every 3 years after that primarily consumer del	t for cases filed on or after the	date of adjustment.	, do not modec
√ Yes.	* Subject Debtor 1 During th	creditor. Do payments to to adjustment	o an attorney for on 4/01/19 a	for this bankruptcy case. and every 3 years after that primarily consumer del	t for cases filed on or after the	date of adjustment.	, do not modec
☑ Yes.	* Subject Debtor 1 During th	or Debtor 2 of e 90 days before to line 7.	on 4/01/19 a on 4/01/19 a or both have ore you filed ach creditor to	for this bankruptcy case. and every 3 years after that primarily consumer del for bankruptcy, did you pay o whom you paid a total of	t for cases filed on or after the	date of adjustment. more? nount you paid that creditor.	. Do not include
Z ÎYes.	* Subject Debtor 1 During th	or Debtor 2 of e 90 days before to to line 7. List below ear payments for payments to payment	on 4/01/19 a on 4/01/19 a or both have ore you filed ach creditor to	for this bankruptcy case. and every 3 years after that primarily consumer del for bankruptcy, did you pay o whom you paid a total of	t for cases filed on or after the bots. y any creditor a total of \$600 or \$600 or \$600 or more and the total an	date of adjustment. more? nount you paid that creditor.	. Do not include
∕ ¶Yes.	* Subject Debtor 1 During th No. G	or Debtor 2 of e 90 days before to to line 7. List below ear payments for payments to payment	on 4/01/19 a on 4/01/19 a or both have ore you filed ach creditor to	for this bankruptcy case. and every 3 years after that e primarily consumer del for bankruptcy, did you pay o whom you paid a total of upport obligations, such as Dates of payment	t for cases filed on or after the bts. y any creditor a total of \$600 or \$600 or more and the total and s child support and alimony. Al	date of adjustment. more? nount you paid that creditor. lso, do not include payment. Amount you still owe	. Do not include s to an attorney for
	* Subject Debtor 1 During th	creditor. Do payments to to adjustment or Debtor 2 de 90 days before to line 7. List below expayments for this bankrup	on 4/01/19 a on 4/01/19 a or both have ore you filed ach creditor to	for this bankruptcy case. and every 3 years after that e primarily consumer del for bankruptcy, did you pay o whom you paid a total of upport obligations, such as	t for cases filed on or after the bts. y any creditor a total of \$600 or \$600 or more and the total and s child support and alimony. Al	date of adjustment. more? nount you paid that creditor. lso, do not include payment	Do not include s to an attorney for Was this payment for
	* Subject Debtor 1 During th No. G Yes.	creditor. Do payments to to adjustment or Debtor 2 de 90 days before to line 7. List below expayments for this bankrup	on 4/01/19 a on 4/01/19 a or both have ore you filed ach creditor to	for this bankruptcy case. and every 3 years after that e primarily consumer del for bankruptcy, did you pay o whom you paid a total of upport obligations, such as Dates of payment	t for cases filed on or after the bts. y any creditor a total of \$600 or \$600 or more and the total and s child support and alimony. Al	date of adjustment. more? nount you paid that creditor. lso, do not include payment. Amount you still owe	Do not include s to an attorney for Was this payment for
	* Subject Debtor 1 During th No. G Yes.	creditor. Do payments to to adjustment or Debtor 2 de 90 days before to line 7. List below expayments for this bankrup	on 4/01/19 a on 4/01/19 a or both have ore you filed ach creditor to	for this bankruptcy case. and every 3 years after that a primarily consumer del for bankruptcy, did you pay o whom you paid a total of upport obligations, such as Dates of payment 03/01/2019	t for cases filed on or after the bts. y any creditor a total of \$600 or \$600 or more and the total and s child support and alimony. Al	date of adjustment. more? nount you paid that creditor. lso, do not include payment. Amount you still owe	. Do not include s to an attorney for Was this payment for Mortgage Car
	* Subject Debtor 1 During th No. G Yes. Landlord Creditor's N	creditor. Do payments to to adjustment or Debtor 2 de 90 days before to line 7. List below expayments for this bankrup	on 4/01/19 a on 4/01/19 a or both have ore you filed ach creditor to	for this bankruptcy case. and every 3 years after that a primarily consumer del for bankruptcy, did you pay o whom you paid a total of upport obligations, such as Dates of payment 03/01/2019	t for cases filed on or after the bts. y any creditor a total of \$600 or \$600 or more and the total and s child support and alimony. Al	date of adjustment. more? nount you paid that creditor. lso, do not include payment. Amount you still owe	Do not include s to an attorney for Was this payment for Mortgage Car Credit card

	Melissa	Lynn	Heiser		Case r	number (if known))
	First Name	Middle Name	Last Name	9			
			Dates of payment	Total amount paid	Amount you still owe	Reason for this	s payment
Insider's N	ame						
Number	Street						
City	State	ZIP Code					
lude payn ✓ No	vear before you filed to the second se	teed or cosigned b		ments or transfer any Total amount paid	property on account of Amount you still owe	a debt that bene Reason for this	s payment
nsider's N							
Number	Street						
City	State	ZIP Code					
rt 4: Id	entify Legal Actio				or administrative proces	eeding?	_
Within 1 yet all such sputes.							modifications, and contra
Within 1 y st all such sputes.		sonal injury cases		s, divorces, collection s			modifications, and contract

	First Name	Middle N	lomo	Look Nomes			
		wildale i	varrie	Last Name			
			Nature of	the case	Court or agency		Status of the case
Case title	LVNV v Heiser		Suit on De	ebt			-4
Case lille	LVIVV V I leisei				Ector County Distriction	ct Court	✓ Pending
Case number	CC2-19-0090-CV						☐ On appeal
					300 N Grant Ave Number Street		☐ Concluded
					Odessa, TX 79761-	E160	
					City	State ZIP Code	
. Within 1 yea neck all that ap	ar before you filed to ply and fill in the de	or bankrur tails below.	otcy, was an	y of your property repo	ssessed, foreclosed, garni	shed, attached, seized, or	r levied?
√ No. Go to	line 11.						
Yes. Fill in	the information belo	DW.					
				Describe the prop	perty	Date	Value of the property
Creditor's Nam	ne						_
Number St	reet			Explain what hap	pened		
				☐ Property was rep			
				☐ Property was for	reclosed.		
				☐ Property was for ☐ Property was ga	reclosed. Irnished.		
	State			Property was for Property was ga	reclosed. urnished. ached, seized, or levied.	n, set off any amounts fr	rom your accounts or refu
. Within 90 da make a paym	ays before you filed nent because you o	l for bankr	uptcy, did ar	Property was for Property was ga	reclosed. Irnished.	n, set off any amounts fr	rom your accounts or refu
. Within 90 da make a paym	ays before you filed nent because you o	l for bankr	uptcy, did ar ?	Property was for Property was ga	reclosed. urnished. ached, seized, or levied. bank or financial institutio	n, set off any amounts fr Date action was taken	rom your accounts or refu
. Within 90 da	ays before you filed nent because you o the details.	l for bankr	uptcy, did ar ?	Property was for Property was ga	reclosed. urnished. ached, seized, or levied. bank or financial institutio	Date action was	
make a paym No Yes. Fill in Creditor's Nam	ays before you filed nent because you o the details.	l for bankr	uptcy, did ar ?	Property was for Property was ga	reclosed. urnished. ached, seized, or levied. bank or financial institutio	Date action was	

otor 1	Melissa	Lynn	Heiser	Case number (if know	vn)
	First Name	Middle Name	Last Name		
irt 5: Lis	st Certain Gifts	and Contribution	ons		
3. Within 2	years before you file	ed for bankruptcy,	did you give any gifts with a total value	e of more than \$600 per person?	
√No					
	I in the details for ea	ach aift			
	n a total value of mo	-	Describe the gifts	Dates you gave	Value
person	i a total value of mo	ore man \$000 per	Describe the girts	the gifts	value
Person to V	Whom You Gave the G	 Gift			
Number	Street				
City	St	tate ZIP Code			
Person's re	elationship to you				
	р ,				
	years before you file	ed for bankruptcy, o	aid you give any gifts or contributions	with a total value of more than \$600 to a	ny charity?
√No					
Yes. Fill	I in the details for ea	ch gift or contribution	n.		
		arities that Descri	be what you contributed	Date you contributed	Value
total more	e than \$600			Contributed	
Charity's Na	ame				
Number	Street				
Number	Olicet				
City	State 2	ZIP Code			
City	State 2	ZIF Code			
rt 6: Lis		2C			
	st Certain Losse	, ,			
	st Certain Losse	,,,			
. Within 1 y			since you filed for bankruptcy, did yo	u lose anything because of theft, fire, oth	er disaster, or gambling?
			since you filed for bankruptcy, did yo	u lose anything because of theft, fire, oth	er disaster, or gambling?
√No			since you filed for bankruptcy, did yo	u lose anything because of theft, fire, oth	er disaster, or gambling?
√No	year before you filed		since you filed for bankruptcy, did yo	u lose anything because of theft, fire, oth	er disaster, or gambling?
√No	year before you filed		since you filed for bankruptcy, did yo	u lose anything because of theft, fire, oth	er disaster, or gambling?
√No	year before you filed		since you filed for bankruptcy, did yo	u lose anything because of theft, fire, oth	er disaster, or gambling?
√ No	year before you filed		since you filed for bankruptcy, did yo	u lose anything because of theft, fire, oth	er disaster, or gambling?
√No	year before you filed		since you filed for bankruptcy, did yo	u lose anything because of theft, fire, oth	er disaster, or gambling?

tor 1	Melissa	Lynn	Heiser	Case number (if kno	own)
	First Name	Middle Name	Last Name		
	the property you lost loss occurred	Include the a	y insurance coverage for the loss mount that insurance has paid. List pending nims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
rt 7: Lis	st Certain Payme	nts or Transfers			
. Within 1	year before you filed	for bankruptcy, did yo	ou or anyone else acting on your behalf pa	ay or transfer any property to an	yone you consulted about
	nkruptcy or preparing attorneys, bankruptcy p		 redit counseling agencies for services required 	red in your bankruptcy.	
√ No					
☐Yes. Fi	ill in the details.				
		Description	on and value of any property transferred	Date payment or transfer was made	Amount of payment
Person Wh	ho Was Paid				
lumber	Street				
unbei	Sileet				
City	State ZI	P Code			
mail or w	vebsite address				
inan or w	repsite address				
Person Wh	no Made the Payment, if	Not You			
Within 1	year before you filed our creditors or to mak	for bankruptcy, did yo	ou or anyone else acting on your behalf pa	ay or transfer any property to any	yone who promised to help
not includ	de any payment or trans	sfer that you listed on li	ne 16.		
√No					
Yes. Fi	ill in the details.				
		Descriptio	on and value of any property transferred	Date payment or transfer was made	Amount of payment
Person Wh	ho Was Paid				
lumber	Street				

ebtor 1	Melissa	Lynn	Heiser	Case number (if known) _	
	First Name	Middle Name	Last Name		
				_	
			ou sell, trade, or otherwise tr	ransfer any property to anyone, other than propert	y transferred in the
		s or financial affairs?	ourity (cuch as the granting of s	a security interest or mortgage on your property).	
o not inclu	de aifts and transfers t	that you have already lis	ted on this statement.	a security interest of mortgage off your property).	
	do gino di la transionoro	and you have an oddy no	nod on the otatomont.		
✓No					
☐ Yes. Fi	II in the details.				
			on and value of property	Describe any property or payments received	Date transfer was
		transferre	d	or debts paid in exchange	made
Person Wh	no Received Transfer				
Number	Street				
-					
City	State 2	ZIP Code			
•					
Person's r	elationship to you				
☐ Yes. Fi	II in the details.				
		Deceriptie	on and value of the property t	transformed	Date transfer was
		Description	in and value of the property i	lialisielleu	made
Name of to	rust				
radine or ti	1401				
art 8: Lis	st Certain Finan	cial Accounts, Ins	truments, Safe Deposit	Boxes, and Storage Units	
0. Within 1	year before you filed	d for bankruptcy, were	any financial accounts or ins	truments held in your name, or for your benefit, cl	osed, sold, moved, or
ansferred			in a second of the		
				osit; shares in banks, credit unions, brokerage house	es, pension funds,
).		
ooperatives	cking, savings, money s, associations, and o	ther financial institutions			
		ther financial institutions			
ooperatives \textsquare No	s, associations, and o	ther financial institutions			
ooperatives \[\] No		ther financial institutions			
ooperatives \[\] No	s, associations, and o	ther financial institutions			
ooperatives \[\] No	s, associations, and o	ther financial institutions			
ooperatives \[\] No	s, associations, and o	ther financial institutions			
cooperatives	s, associations, and o	ther financial institutions			
cooperatives	s, associations, and o	ther financial institutions			
ooperatives \[\] No	s, associations, and o	ther financial institutions			
ooperatives \[\] No	s, associations, and o	ther financial institutions			
cooperatives	s, associations, and o	ther financial institutions			
ooperatives \textsquare No	s, associations, and o	ther financial institutions			

otor 1	Melissa First Name	Lynn Middle Na	Heiser Last Name		Case number (if known)	
	i iist Name		_ast 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or	Last balance before closing or
					transferred	transfer
	s Credit Union inancial Institution			,	2018	\$0.00
Name of i)	XXXX			φο.σο
NI I	Street			Savings		
Number	Street			☐ Money market ☐ Brokerage		
				Other		
City	State Z	IP Code				
√ No ☐Yes. F	ill in the details.		Who else had access to it?	Describe the co	ontents	Do you still have
						it?
						□No
Name of F	inancial Institution	r	Name			Yes
Number	Street	1	Number Street			
			City State ZIP Cod	de		
City	State Z	IP Code				
Oity	Oldio 2	0000				
√No	ou stored property in	a storage unit	or place other than your home with	nin 1 year before you filed	for bankruptcy?	
√No		a storage unit	Who else has or had access to it?	Describe the co		Do you still have it?
√ No ☐Yes. F	ill in the details.	a storage unit				
√ No ☐ Yes. F						it?
✓ No ☐ Yes. F	ill in the details.		Who else has or had access to it?			it? □No
☑ No ☐ Yes. F	ill in the details.		Who else has or had access to it?	Describe the co		□No

ebtor 1	Melissa	Lynn	Heiser	Case number (if ki	nown)
	First Name	Middle Name	Last Name		
Part 9: Id	lentify Property `	You Hold or Contr	ol for Someone Else	е	
23. Do you	hold or control any p	roperty that someone	else owns? Include any	property you borrowed from, are storing for, or I	nold in trust for someone.
√No					
SE INO					
Yes. F	ill in the details.				
		Where	is the property?	Describe the property	Value
		William	is the property.	besonibe the property	value
Owner's N	lame	Number	Street		
Number	Street				
Number	Olicci				
		City	State ZIP	Code	
City	State Z	IP Code			
-					
	0. 5				
art 10: (Give Details Abou	ut Environmental	Information		
leport all n			know about, regardless	of when they occurred. Iy liable under or in violation of an environmenta	l law?
☐ Yes. F	ill in the details.				
		Governr	nental unit	Environmental law, if you know it	Date of notice
		Governi	nentai unit	Liviloninentariaw, ii you know it	Date of Hotice
Name of s	ite	Governme	ntal unit		
Nivershau	Ctuant	Number	Ctuant		
Number	Street	Number	Street		
				<u> </u>	
		City	State ZIP Code		
City	State Z	IP Code			
5. Have yo	ou notified any goveri	nmental unit of any re	lease of hazardous mate	erial?	
√No		-			
MI INO					
Yes. F	ill in the details.				

otor 1	Melissa	Lynn	Heiser	Case number (i	f known)
	First Name	Middle N	Name Last Name		
			Governmental unit	Environmental law, if you know it	Date of notice
Name of sit	re		Governmental unit		
itamo or on		·	Soverimental and		
Number	Street		Number Street		
			City State ZIP Code		
City	State 2	ZIP Code			
	ı been a party in any	y judicial or a	dministrative proceeding under any	environmental law? Include settlements ar	nd orders.
√ No □v =					
∟ Yes. Fil	Il in the details.				
			Court or agency	Nature of the case	Status of the case
Case title					☐Pending
		(Court Name		On appeal
			Number Street		☐Concluded
		<u> </u>	Number Street		
Case numb	oer	-	City State ZIP Code		
rt 11: G	Give Details Abo	ut Your Bu	siness or Connections to Any	Business	
'. Within 4	years before you file	ed for bankru	uptcy, did you own a business or have	e any of the following connections to any b	ousiness?
☐ A :	sole proprietor or sel	f-employed in	a trade, profession, or other activity, e	ither full-time or part-time	
□ A	member of a limited	liability compa	any (LLC) or limited liability partnership	(LLP)	
□ A	partner in a partners	hip			
☐ Ar	n officer, director, or r	nanaging exe	ecutive of a corporation		
☐ Ar	n owner of at least 5%	% of the voting	g or equity securities of a corporation		
√ No. Nor	ne of the above appli	es. Go to Part	12.		
Yes. Ch	neck all that apply abo	ove and fill in t	the details below for each business.		
			Describe the nature of the busines		n number Security number or ITIN.
Name					·
				EIN:	
Number	Street		Name of accountant or bookkeepe	Pr Dates business existe	d
				From	. То
City	State 7	IP Code			

otor 1				
	Melissa	Lynn	Heiser	Case number (if known)
	First Name	Middle Name	Last Name	
		ed for bankruptcy, did y	ou give a financial statement	to anyone about your business? Include all financial institutions, creditors
other pa √INo	rues.			
Yes. F	ill in the details below	<i>'</i> .		
		Date iss	ued	
lame		MM / DD / Y	YYYY	
lumber	Street			
ity	State Z	ZIP Code		
	Sign Below	Statement of Einannial	Affaire and any attachments	and I declars under penalty of perium that the answers are true and
ave read	the answers on this nderstand that makir	ng a false statement, co	ncealing property, or obtaining	and I declare under penalty of perjury that the answers are true and g money or property by fraud in connection with a bankruptcy case C. §§ 152, 1341, 1519, and 3571.
ave read rrect. I ur	the answers on this nderstand that makir	ng a false statement, co	ncealing property, or obtaining	g money or property by fraud in connection with a bankruptcy case
ave read rect. I ur	the answers on this nderstand that makir n fines up to \$250,000	ng a false statement, co 0, or imprisonment for u	encealing property, or obtaining up to 20 years, or both. 18 U.S.	g money or property by fraud in connection with a bankruptcy case C. §§ 152, 1341, 1519, and 3571.
ave read rect. I ur n result ir	the answers on this nderstand that makir n fines up to \$250,000	ng a false statement, co 0, or imprisonment for u sa Lynn Heiser	encealing property, or obtaining up to 20 years, or both. 18 U.S.	g money or property by fraud in connection with a bankruptcy case
ave read rect. I ur n result in Signa	the answers on this nderstand that makin n fines up to \$250,000 /s/ Meliss	ng a false statement, co 0, or imprisonment for u sa Lynn Heiser	procealing property, or obtaining up to 20 years, or both. 18 U.S.	g money or property by fraud in connection with a bankruptcy case C. §§ 152, 1341, 1519, and 3571.
ave read rrect. I ur n result ir Signa	the answers on this nderstand that makin n fines up to \$250,000 /s/ Meliss ature of Melissa Lynn	ng a false statement, co 0, or imprisonment for u sa Lynn Heiser	procealing property, or obtaining up to 20 years, or both. 18 U.S.	g money or property by fraud in connection with a bankruptcy case C. §§ 152, 1341, 1519, and 3571.
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Fill in this information to identify your case:					
Debtor 1	Melissa	Lynn	Heiser		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bankr	uptcy Court for the:		Western District of Texas		
Case number (if known)					

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

Check if this is an amended filing

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral

What do you intend to do with the property that secures a Did you claim the property as debt?

Example 2 debt 2 debt 2 debt 3 debt 3 debt 3 debt 4 debt 4 debt 4 debt 5 debt 5 debt 6 de

_		
10	btor	1

 Melissa
 Lynn
 Heiser
 Case number (if known)

 First Name
 Middle Name
 Last Name

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information
below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal
property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Lessor's name: Description of leased properly: Lessor's name: Sprint Description of leased properly: Phone Lease Lessor's name: Description of leased properly: Signature of Debtor 1 Date <u>OWARANCO NAME</u> Signature of Debtor 2 Date <u>OWARANCO NAME</u>	Describe your unexpire	d personal property leases		Will the lease be assumed?
Description of leased property: Lessor's name: Description of leased property: Sign Bellow Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease. X Signature of Debtor 2 Date Date Signature of Debtor 2	Lessor's name:	USAutomax		☐ No
Description of leased property: Phone Lease		Auto Lease		√ Yes
Description of leased property: Lessor's name: Description of leased property: Sign Below Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease. X_A/Melissa Lynn Heiser	Lessor's name:	Sprint		
Description of leased property: Lessor's name: No Yes Part 3: Sign Below Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease. **Signature of Debtor 1** Date 03/26/2019 Date 03/26/2019		Phone Lease		√ Yes
Description of leased property: Lessor's name: Description of leased property: Sign Below Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease. (Is/ Melissa Lynn Heiser Signature of Debtor 2 Date 03/26/2019 Date Date	Lessor's name:			☐ No
Description of leased property: Lessor's name: No Description of leased property: Lessor's name: Sign Below Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease. (Is/ Melissa Lynn Heiser Signature of Debtor 2 Date Date Date				Yes
Description of leased property: Lessor's name: No Yes Part 3: Sign Below Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease. Signature of Debtor 1 Signature of Debtor 2	Lessor's name:			☐ No
Description of leased property: Lessor's name: Description of leased property: Description of leased property				Yes
Description of leased property: Lessor's name: Description of leased property: Lessor's name: Description of leased property: Lessor's name: Description of leased property: Vart 3: Sign Below Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease. Signature of Debtor 1	Lessor's name:			□ No
Description of leased property: Lessor's name: Description of leased property: Vart 3: Sign Below Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease. Yes Yes				Yes
Description of leased property: Lessor's name: Description of leased property: Description of leased property: Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease. Signature of Debtor 1 Signature of Debtor 2	Lessor's name:			☐ No
Description of leased property: Yes				Yes
Description of leased property: Sign Below Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease. Signature of Debtor 1 Signature of Debtor 2	Lessor's name:			☐ No
Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease. Signature of Debtor 1 Signature of Debtor 2	•			Yes
Signature of Debtor 1 Date 03/26/2019 Date 03/26/2019 Date 03/26/2019 Date 03/26/2019 Date 03/26/2019	Part 3: Sign Below			
Signature of Debtor 1 Signature of Debtor 2 Date 03/26/2019 Date	Under penalty of perjury, is subject to an unexpire	I declare that I have indicated my d lease.	r intention about any property of my estate that secures a deb	ot and any personal property that
Date <u>03/26/2019</u> Date	/s/ Melis	ssa Lynn Heiser	•	_
Date 03/26/2019 Date	Signature of Debtor 1		Signature of Debtor 2	
MIN/ DD/ TTTT	Date 03/26/2019 MM/ DD/ YYYY		Date	

United States Bankruptcy Court Western District of Texas

In	re		
He	iser, Melissa Lynn	Case No	
De	btor(s)	Chapter	7
	DISCLOSURE OF COMPENSATION	N OF ATTORNEY FOR DEBTO	R
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I cert compensation paid to me within one year before the filing of the rendered or to be rendered on behalf of the debtor(s) in contempla	petition in bankruptcy, or agreed	d to be paid to me, for service
	For legal services, I have agreed to accept Prior to the filing of this statement I have received		\$0.00 \$0.00 \$0.00
2.	The source of the compensation to be paid to me was: ✓ Debtor		
3.	The source of compensation to be paid to me is: ☑ Debtor ☐ Other (specify)		
4.	☑ I have not agreed to share the above-disclosed compensation of my law firm.	n with any other person unless th	ey are members and associate
	☐ I have agreed to share the above-disclosed compensation wit of my law firm. A copy of the agreement, together with a list of the		
5.	In return for the above-disclosed fee, I have agreed to render lega	al service for all aspects of the ba	ankruptcy case, including:
	 a. Analysis of the debtor's financial situation, and rendering a bankruptcy; 	·	· · ·
	b. Preparation and filing of any petition, schedules, statements ofc. Representation of the debtor at the meeting of creditors and of	,	•
6.	By agreement with the debtor(s), the above-disclosed fee does no	ot include the following services:	
	CERTIFICA	ATION	
	I certify that the foregoing is a complete statem payment to me for representation of the debtor(s)		ement for
	03/26/2019 /s/ Victor L. H		
	Date Signature	e of Attorney	_

Legal Aid of NorthWest Texas Name of law firm

IN THE UNITED STATES BANKRUPTCY COURT WESTERN DISTRICT OF TEXAS MIDLAND DIVISION

IN RE: **Heiser, Melissa Lynn**CASE NO

CHAPTER **7**

VERIFICATION OF CREDITOR MATRIX

	VERIFICATION OF CREDITOR MAIRIX								
The a	The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.								
Date _	03/26/2019	_ Signature	/s/ Melissa Lynn Heiser						
			Melissa Lynn Heiser, Debtor						

Avant, Inc.

222 N La Salle St Ste 1700 Chicago, IL 60601-1101

Capital One

Attn: General Correspondence/Bankruptcy PO Box 30285 Salt Lake City, UT 84130-0287

Capital One

Po Box 85015 Richmond, VA 23285-5015

Capital One Bank

10700 Capitol One Way Glen Allen, VA 23060-9243

Citibank NA

701 East 60th St. North Sioux Falls, SD 57104

Citicards Cbna

Citicorp Credit Svc/Centralized Bankruptcy PO Box 790040 Saint Louis, MO 63179

Citicards CBNA

PO Box 6497 Po Box 6241 Sioux Falls, SD 57117-6241

Comenity Bank

PO Box 182789 Columbus, OH 43218-2789

Comenity Bank / Lane Bryant

Po Box 659728 San Antonio, TX 78265-9728

Comenity Bank/ BryIn Hme

Po Box 182789 Columbus, OH 43218-2789

Comenity Bank/ HSN

Po Box 182120 Columbus, OH 43218-2120

Comenity Bank/ Lane Bryant

Po Box 182789 Columbus, OH 43218-2789

Comenity Bank/ Roamans

Po Box 182789 Columbus, OH 43218-2789

Comenity Bank/Ashstwrt

Po Box 182789 Columbus, OH 43218-2789

Comenity Bank/Roamans

Attn: Bankruptcy PO Box 182125 Columbus, OH 43218

Comenity Bank/Torrid

Po Box 182789 Columbus, OH 43218-2789

Conn Credit Company

Po Box 2358 Beaumont, TX 77704-2358

Conns Credit Corporation

3295 College St Beaumont, TX 77701-4611

Discover Card PO Box 15316

Wilmington, DE 19850

Equifax

PO Box 740241 Atlanta, GA 30374-0241

Experian

701 Experian Pkwy Allen, TX 75013-3713

Melissa Lynn Heiser Po Box 1526

Odessa, TX 79760-1526

Legal Aid of NorthWest Texas

1515 Main St. Dallas, TX 75201

LVNV Funding LLC Partial Account

PO Box 1269 Greenville, SC 29602

Members Financial FCU 3100 Sunburst Dr Midland, TX 79707-5216

Members Financial FCU Po Box 9609 Midland, TX 79708-9609

Midland Credit Management 2635 Northside Dr. Suite 300 San Diego, CA 92108

Midland Funding 2365 Northside Dr Ste 300 San Diego, CA 92108

Plaza Services, Llc 110 Hammond Dr Ste 110 Atlanta, GA 30328

Portfolio Recovery PO Box 41067 Norfolk, VA 23541

Portfolio Recovery Associates, LLC 120 Corporate Blvd # 100 Norfolk, VA 23502-4952

Rausch Sturm I srael, etc. 15660 North Dallas Pkwy. Suite 350 Dallas, TX 75248

Scott and Associates

Po Box 115220 Carrollton, TX 75011-5220

Seventh Ave.

1515 21st St Monroe, WI 53566

Seventh Avenue

1112 Seventh Ave Monroe, WI 53566-1364

Sprint

PO Box 4191 Carol Stream, IL 60197

Sprint Spectrum

6200 Sprint Pkwy Overland Park, KS 66251-6117

Syncb/Amazon

Po Box 965036 Orlando, FL 32896-5036

SYNCB/Amazon

Po Box 965015 Orlando, FL 32896-5015

SYNCB/Car Care Disc Tire

Po Box 965001 Orlando, FL 32896-5001

SYNCB/Car Care Disc Tire

Po Box 965068 Orlando, FL 32896-5068

SYNCB/Conns

Po Box 965036 Orlando, FL 32896-5036

SYNCB/OVC

Po Box 965005 Orlando, FL 32896-5005

SYNCB/QVC

Po Box 965036 Orlando, FL 32896-5036

SYNCB/Walmart

Po Box 965024 Orlando, FL 32896-5024

SYNCHRONY BANK

ATTN: BANKRUPTCY DEPT PO BOX 965060 ORLANDO, FL 32896-5060

Synchrony Bank/Walmart

Attn: Bankruptcy PO Box 956060 Orlando, FL 32896-5060

Toyota Motor credit Corp

Po Box 9786 Cedar Rapids, IA 52409

Toyota Motor Credit Corporation

5005 N River Blvd Ne Cedar Rapids, IA 52411-6634

Transunion

PO Box 1000 Chester, PA 19022

USAutomax

1024 N County Rd W Odessa, TX 79763-3436

Verizon Wireless

PO Box 650051 Dallas, TX 75265-0051

WebBank

215 S State St Ste 800 Salt Lake City, UT 84111

Webbank/Fingerhut

6250 Ridgewood Rd Saint Cloud, MN 56303-0820

Wells Fargo Card Services

Po Box 14517 Des Moines, IA 50306-3517

World Finance

108 Frederick Street Greenville, SC 29607 World Finance Co. P.O. Box 6429 Greensboro, SC 29696